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TRANSACTIONS of the Canadian Dental Association

DÉLIBÉRATIONS de l'Association Dentaire Canadienne



INTERIM AND ANNUAL MEETINGS
BOARD OF GOVERNORS
MAY 1 AND SEPTEMBER 10-11

1993

ASSEMBLÉES PROVISOIRE ET ANNUELLE
DU BUREAU DES GOUVERNEURS
LE 1 MAI ET LES 10-11 SEPTEMBRE

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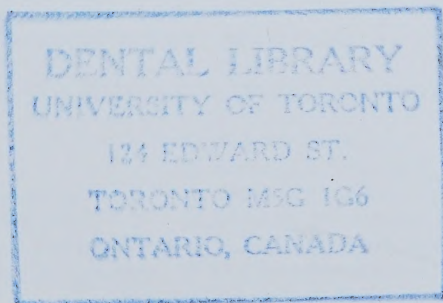
**INTERIM MEETING
BOARD OF GOVERNORS
CANADIAN DENTAL ASSOCIATION**

**ASSEMBLÉE PROVISOIRE
DU BUREAU DES GOUVERNEURS
L'ASSOCIATION DENTAIRE CANADIENNE**

TORONTO, ONTARIO

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1993





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AVANT-PROPOS

Le présent document contient le compte-rendu des travaux des assemblées, provisoire et annuelle, du Bureau des gouverneurs de l'Association dentaire canadienne, qui ont eu lieu respectivement le 1er mai 1993, à Toronto, Ontario et les 10 et 11 septembre de la même année, à Ottawa, Ontario.

Tous les membres de l'Association dentaire canadienne sont bienvenus à ces assemblées auxquelles ils peuvent participer.

Les rapports des conseils, des commissions, des comités et des sections ainsi que d'autres documents sont présentés au cours de séances publiques. Le président peut permettre aux membres de l'Association de s'exprimer sur diverses questions mais seuls les gouverneurs ont droit de vote.

Assemblée provisoire et annuelle

Les textes inscrits en caractères gras dans les rapports des conseils, des comités, des commissions et des sections, ou à la fin, présentent les observations et les actes posés par le Bureau des gouverneurs.

Les DÉLIBÉRATIONS DE L'ADC ont pour objet de fournir aux membres un compte-rendu des orientations et des décisions prises par le Bureau des gouverneurs ainsi que des travaux des conseils, des commissions, des comités et des sections de l'Association.

FORWARD

This book provides a record of the business transacted at the Interim and Annual meetings of the Board of Governors of the Canadian Dental Association, on May 1, 1993 in Toronto, Ontario and September 10-11, 1993 in Ottawa, Ontario.

All members of the Canadian Dental Association are welcome to attend and to participate in the meetings of the Board of Governors.

During the sessions, reports of Councils, Commissions, Committees and Sections, etc., are brought to open sessions of the Board, and, although the Chairman may permit any member to speak on any issue, only Board members may vote.

Interim and Annual Meeting

Words appearing in bold both within the body and at the end of the Council, Committee, Commission or Section Reports constitute the comments and actions of the Board of Governors.

The purpose of the CDA TRANSACTIONS is to provide members with a record of the policies and decisions of the Board of Governors and the work of the Association's Councils, Commissions, Committees and Sections.

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W. Steggles (Community & Inst. Dentistry)
M. Eggert (Consumer Products Recognition)
M. Jahjah (Conventions)
D. Jones (Dental Materials & Devices)
I. Vogan (Dental Specialties)
G. Thompson (Education)

M. Deyette (Ethics)
B. Sigfstead (Government Relations)
R. Moran (Insurance & Investment)
B. Dolansky (Management)
B. Dolman (Membership)
B. Sigfstead (Nominations)
M. Fatahzadeh (Student Affairs)
R.N. Hicks (Taxation)
L. Dugal (Third Party)

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B. Wishart	New Brunswick Dental Society
J. Wright	Canadian Dental Service Plans Inc.

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EXECUTIVE COUNCIL

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

- Members:** Dr. Bernard Dolansky, Ottawa - Chairman
Dr. Raymond Wenn, Charlottetown
Dr. Bryun Sigfstead, Edmonton
Dr. Les Allen, Winnipeg
Dr. Jim Brookfield, Kirkland Lake
Dr. John Diggins, Vancouver
Dr. Barry Dolman, Montréal
Dr. Toby Gushue, St. John's
Dr. Richard Sandilands, Edmonton
Dr. Bernie White, Saskatoon
- Senior Staff:** Mr. Jardine Neilson, Executive Director
Ms. Sandra Deziel, Manager - Executive Services
- Coordinator:** Mrs. Suzanne Burton

1. Council Meetings

Since the August 1992 Annual Meeting of the Board of Governors, the Executive Council has met three times - August 29, October 30, 1992 and February 11-13, 1993. The Executive Council Planning Session was held on October 30 to November 1, 1992. Dr. Allen completed his term on Executive Council at the termination of this meeting.

ITEMS REQUIRING BOARD ACTION

2. FDI Delegates

RESOLVED:

- 93.1 THAT the CDA Official Delegates to the 1993 FDI Congress in Göteborg be Dr. Ray Wenn, CDA President-Elect and Mr. Jardine Neilson, Executive Director and FDI National Treasurer.

ADOPTED

The CDA Alternate Delegates to the 1993 FDI Congress in Göteborg will be Dr. Michel Jahjah and Col. Victor Lancitis. The attendance of Alternate Delegates is at no additional cost to CDA, and is subject to confirmation of their attendance at FDI.

3. **Appointment of Auditors - Canadian Dentists' Insurance Program (CDIP)**

RESOLVED:

- 93.2 **THAT the firm of Clarke, Henning and Company
be appointed auditors for CDIP for 1993.**

ADOPTED

4. **Dental Specialties Committee**

When the Dental Specialties Committee was formed in 1987, one of the primary responsibilities stated in its terms of reference was the provision of a forum for discussion of common interests and concerns of Canadian specialty groups. Although the Committee, with members named by each specialty organization acts in this capacity, it has become obvious over the past two years that it does not provide an effective mechanism for communication between the leaders of specialty organizations and CDA. Correspondence received from specialty association presidents on a variety of topics, including the Uniform System of Codes & List of Services, CDAnet (EDI), and the Dental Information System, have pointed to a need for improved communication between decision-taking levels.

At its 1992 Planning Session, the Executive Council therefore decided to recommend to the 1993 Interim Meeting of the Board of Governors, that the Dental Specialties Committee be disbanded and replaced by a meeting between the CDA Management Committee and Presidents of Specialty Sections. This proposal called for the CDA to be financially responsible for its representatives, and costs associated with administering the meeting; specialty organizations would be expected to fund the travel and accommodation costs of their representatives. Frequency of meetings would depend upon a demonstrated need for discussion identified by either the CDA or specialty organizations.

The proposal of the Executive Council was communicated to specialty organizations and members of the CDA Dental Specialties Committee. Responding correspondence has indicated some significant concern with the Executive Council's recommendation. In proposing change to this area, the Executive Council believes that it must strive to achieve an improvement to the current and past mechanisms of communication between CDA and its Specialty Sections. It is clear that this can only be achieved through consensus between the CDA and specialty organizations.

Following discussion at Council's February meeting, an invitation was extended to Specialty Presidents and the President of RCDC to meet with CDA's Management Committee during the CDA Annual Dental Meeting.

The purpose of this meeting is two-fold. Firstly, to discuss the rationale behind the Executive Council's recommendation to disband the Dental Specialties Committee and secondly, to examine options which would provide an effective communication mechanism which meets the needs of both the CDA and specialty organizations. If the response to this invitation is favourable, Governors will be provided with an update on this issue.

RESOLVED:

- 93.3 **THAT the Dental Specialties Committee be disbanded and replaced by a meeting between CDA Management Committee and Presidents of Specialty Sections, or other effective communication mechanisms.**

ADOPTED

5. **Terms of Reference - Working Group on Membership Concerns**

Many activities and services provided by professional associations accrue to all members of the profession and through them to their patients. Thus, the Executive Council believes it essential to examine initiatives to secure funding for CDA from all members of the dental profession.

The 1992 Planning Session determined that the CDA's fee structure for individual dentists, Corporate Members and Licensing Bodies requires review and exploration.

RESOLVED:

- 93.4 **THAT a CDA working group on membership concerns be established as an Ad Hoc Committee of the Executive Council; and**

THAT the appended terms of reference for the working group on membership concerns be approved.

ADOPTED

Subject to the Board's approval of the above recommendation, the Executive Council has named Vice-President, Dr. Bryun Sigfstead to chair the working group. The selection of other members, based on geographic considerations, is ongoing.

6. Canadian Forces Dental Services' Representation - Committee on Community and Institutional Dentistry

The Committee on Community and Institutional Dentistry has identified that representation from the Canadian Forces Dental Services would be beneficial. This dimension was previously addressed on the Council on Health Care, but was lost in the restructuring which established the Committee on Community and Institutional Dentistry.

RESOLVED:

- 93.5 **THAT the terms of reference of the Committee on Community and Institutional Dentistry be revised to include representation from the Canadian Forces Dental Services.**

APPENDIX II

ADOPTED

NOTE: The Board of Governors directed that Executive Council review the Committee's Terms of Reference to ensure if specific reference to PRUC is required.

7. Committees of the Council on Education

At the 1992 Annual Meeting, the Board of Governors directed that the terms of reference for the Continuing Education Committee, the Dental Admissions Committee, and the Nominating Committee of the Council on Education be presented for approval. These documents were reviewed and amended by the Executive Council at its February meeting, and are presented for approval.

RESOLVED:

- 93.6 **THAT the terms of reference for the Continuing Education Committee of the Council on Education be approved.**

ADOPTED

APPENDIX III-A

RESOLVED:

- 93.7 **THAT the terms of reference for the Dental Admissions Committee of the Council on Education be approved.**

ADOPTED

APPENDIX III-B

RESOLVED:

- 93.8 **THAT the terms of reference for the Nominating Committee of the Council on Education be approved.**

ADOPTED

APPENDIX III-C

8. 1993 Participation Agreement - Amendment to Section 9

Section 9 - Surplus of the 1992 Participation Agreement between CDA and participating Corporate Members contains a stipulation with regard to the Executive Council's responsibility on the use of CDIP surpluses. The second paragraph of Section 9 indicates that review and decision-making regarding the surplus take place on an annual basis, specifically at the Executive Council meeting held in preparation for the Annual Meeting of the CDA Board of Governors. The Executive Council meeting normally takes place in the early part of June.

Executive Council was concerned that the audited annual financial statements for the CDIP plans, and relevant recommendations from the Council on Insurance and Investment, have on occasion not arrived in time for discussion and decisions to take place on this item at the Executive Council's June Pre-Board Meeting. This matter was brought to the attention of CDSPI, which responded with an amended wording to Section 9, Surplus. The proposed amendment, which is appended for the Board's consideration, was circulated to all co-sponsors, approved by them, and incorporated into the 1993 Participation Agreement. The Executive Council approved the amended wording of Section 9 - Surplus on behalf of the CDA.

APPENDIX IV

RESOLVED:

- 93.9 **THAT the CDA Board of Governors ratify the action of its Executive Council as outlined in the appended amendment to Section 9 of the Participation Agreement.**

ADOPTED

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION**9. Executive Council Management of CDIP Surpluses - Judgment of the Honourable Mr. Justice McKeown**

On December 23, 1992 a judgment was released by the Ontario Court of Justice (Commercial Court) on the actions of the CDA Executive Council as Trustees of CDIP surpluses. Justice William McKeown found that surplus funds must be distributed, on a pro-rata basis, to plan participants who contributed to them. Justice McKeown's judgment stated that although the Executive Council had not acted in bad faith, it approved utilization of surplus funds not consistent with its Trust responsibilities.

On January 27, 1993, CDA and CDSPI Management Committees met with CDA legal counsel, Mr. Jeff Leon and Mr. Peter Pliszka, and legal counsel for CDSPI, Mrs. Beth Moore. The primary purpose of the meeting was to discuss the findings of Justice McKeown, and ensure that all the information necessary to the Executive Council was made available for its February meeting.

The CDA filed a notice of appeal on Monday, February 1, 1993. CDA has thirty days from this date in which to file the written argument in support of the appeal, or to request an extension of time to do so.

At its February meeting, Executive Council reviewed the following documentation:

- the judgment of Justice McKeown;
- questions and answers on the judgment which were developed in the forum of CDSPI lawyers, actuaries, and the Management Committees of CDSPI and CDA;
- notes from the January 27 meeting between CDA/CDSPI and legal counsel;
- a report of a meeting held with Mr. Vern Rogers, legal counsel to Guardian Insurance Company, CDA's insurers for errors and omissions, and officers and directors insurance coverage;
- an opinion provided by Mr. Denis Power of Nelligan Power on an appeal of the judgment of Justice McKeown;
- an opinion provided by Mr. Burton Tait of McCarthy Tétrault on an appeal of the judgment of Justice McKeown;

- provisional information prepared by CDSPI with regard to amounts to be distributed to follow the judgment laid down by Justice McKeown.
- the notice of appeal filed February 1, 1993.

Prior to the receipt of the resource documentation for the meeting, all members of Executive Council were informed that while they were there by virtue of being representatives of a province or region, that CDA's legal counsel had emphasized that with regard to discussion and decision-making of this issue, members of Executive Council have a separate fiduciary duty as Trustees of surplus funds. Documents and their contents should not be shared with anyone, including the Corporate Bodies that members represent, as their interest and responsibilities may not always be consistent with those of the CDA. Each Corporate Member has had the benefit of independent legal counsel in this matter to date. Advice from CDA Counsel is that each member of Executive Council should be aware of a potential for conflict of interest, as Trustees in this case.

Advice received from CDA's legal counsel at Fasken Campbell Godfrey, Mr. Burton Tait of McCarthy Tétrault, and Mr. Denis Power of Nelligan Power is in favour of CDA pursuing an appeal of Judge McKeown's judgment of December 23, 1992. If necessary, CDA will seek an extension of the time required for perfecting an appeal, as discussions and direction to counsel are ongoing on this matter at this time. In an appeal proceeding, CDA will seek the support of the provincial co-sponsors. In addition, Executive Council has delegated the selection of a senior legal counsel to augment CDA's legal counsel team, to Management Committee.

Concurrently with the appeal process, Executive Council directed legal counsel to pursue discussions which might achieve agreement, allowing CDA to minimize the expenditure of human and financial resources, while respecting established principles and parameters.

The Executive Council has directed that CDA make no further use of CDIP surplus funds until this matter is resolved, except with regard to the payment of taxes.

10. Imperial Life - Legal Matters - CDA RSP

At the 1992 Annual Meeting, Governors approved the renewal of the CDA RSP variable annuity contract with Laurentian Imperial, and investment management services with Canagex Associates Inc. for the three years - 1993, 1994 and 1995, with no fee increase, based on the settlement of all outstanding items with Laurentian Imperial and Imperial Life by December 31, 1992. Failing settlement, the contract would be renewed for one year only, and be subject to further annual renewal for 1994 and 1995.

At its December 1992 meeting, the CDSPI Board approved a proposal to bring an end to all of the legal matters between Imperial Life, CDA and CDSPI. Included in the proposal was the renewal of Laurentian Imperial as annuity contract holder for a four year period commencing January 1, 1993, with the same contract provisions and management fees as in the current contract. This proposal was approved by the Executive Council on behalf of the Board of Governors. Information concerning the Executive Council's action in this regard was circulated to the Board of Governors on January 18, 1993.

Acceptance of the settlement proposal is subject to signing off a letter of agreement, which will confirm the terms of the settlement arrangements, and a process of dismissal on consent, of all court proceedings brought in connection with the outstanding issues. A letter of agreement has been forwarded to Imperial for review and comment. When it has been signed, and the litigation proceedings dismissed, the CDA will accept an amendment to the variable annuity contract for the CDA RSP, extending it on its current terms and conditions to December 31, 1996.

11. **1992 Audited Financial Statements - CDA RSP**

The audited financial statements for the CDA RSP to May 29, 1992 were approved by Management Committee and ratified by the Executive Council at its August, 1992 meeting. Governors will recall that this approval mechanism is required in order that the financial statements appear in the annual report on the CDA RSP. The 1992 audited financial statements for the CDA RSP are appended.

APPENDIX V

12. **Disability and Life Insurance Plans Trusts**

Executive Council reviewed a statement dated August, 1992 outlining income and expenditures for the Disability and Life Insurance Plans Trusts. The statement included the payment of income taxes through instalments as approved by the Executive Council. In addition, Executive Council receives copies of assessment notices on the trusts from Revenue Canada indicating taxes payable and refunds due. Executive Council, as trustees, will continue to review this information on an annual basis.

13. **Council on Insurance and Investment - Terms of Members**

Article XVI - Section 3 (a) and (b) - General Rules of CDA's Constitution and By-Laws state that the term of office of Council or Commission members other than members of the Executive Council shall be three years, and further that the tenure of office shall be limited to two terms of three years. In September of 1992, Mr. Kingsley Butler, Executive Vice-President of CDSPI wrote to question how these by-laws stipulations would apply to CDA's Council on Insurance and Investment.

In reviewing this matter, the Executive Council found that the terms of reference for the Council on Insurance and Investment as described in the By-Laws, and the annual appointment of the CDSPI Board of Directors as the Council on Insurance and Investment, allow the terms of members of the Council on Insurance and Investment to continue beyond the six year provision. This also allows the Council on Insurance and Investment to operate outside CDA's nomination and election process.

In providing its response to CDSPI, Council noted that it would not be CDA's intention to allow either of its voting directors to serve as members of the Council on Insurance and Investment beyond six years, other than in exceptional circumstances. CDA has tried to influence its Corporate Members to give very careful consideration in their appointments to the CDSPI Board, especially in regard to those who have remained in these positions for lengthy periods.

14. **Claims Dispute Mechanism**

Claim disputes between two individual participants in CDIP and CDA past insurers have been brought to the attention of Executive Council. One dispute involved Metropolitan Life, the other Imperial Life. The group policy with both of these insurers provided a claims review process. Executive Council directed CDSPI to activate this process on behalf of these individuals.

In one instance, the claim was settled prior to activation of the claims review process. In the other case, legal counsel for the participant concerned requested that the process not be initiated on behalf of his client, but preferred to pursue the matter in the courts.

15. **Plan Improvements - CDIP - CDA RSP**

The Executive Council approved recommendations from the Council on Insurance and Investment providing plan improvements to both CDIP and the CDA RSP. The improvements to CDIP were effective January 1, 1993 and were at no additional cost. Changes to the CDA RSP were effective immediately. Executive Council's approval was required in order that plan improvements could be communicated and be effective January 1, 1993. The motions passed by Executive Council are appended.

APPENDIX VI

16. **Practice Management Program**

The Communications Steering Committee, through its Membership Sub-Committee, has identified new graduates as a target market for membership recruitment and retention. With this in mind, the Steering Committee has investigated programs that would provide tangible benefits to new graduates, and specifically the provision of a practice management program. The program would offer seminars and accompanying learning resources, including cassettes and workbooks, geared to the new graduate. A proposal submitted by ExperDent Consultants for the New Graduate Program was examined by Management Committee and Executive Council at the 1992 Planning Session.

As directed by the Executive Council, the CDA has communicated with Deans of Dental Faculties and the ACFD with regard to the proposed New Graduate Program through ExperDent, in order to gauge their receptivity to the concept and the possibility of provision of classroom time. Current plans include pilot seminars during 1993.

Mr. Imtiaz Manji, President, ExperDent Consultants presented an overview of the Program to Executive Council at its February Meeting. A draft contract between ExperDent and CDA was reviewed by Executive Council and will be finalized shortly.

CDA is also aware of the ADA Success Program - Staring Your Own Dental Practice. Over the past two years, the ADA has presented this seminar at eight Canadian Dental Schools. At some schools, a full day of classroom time has been allocated for the presentation. A meeting is planned between CDA and ADA Management Committees this Spring; the subject of the ADA Success Program, and the potential of a cooperative venture will be discussed.

17. **1992 Planning Session**

The 1992 Planning Session extended the planning framework, beyond the Mission Statement and goal-setting work of 1991, by developing and approving statements of Association objectives following a process of validating them against CDA's Mission and Goals. The Management Committee report contains further information with regard to proposals for adjustment to the 1993 budget and the 1994 provisional budget.

18. **Governance**

Set down in By-Laws, governance encompasses broad direction and tasks of the Board of Governors, Executive Council, the Officers and Management Committee and, through terms of reference, all Councils, Committees and Commissions. The objectives and major activities of CDA's elected and appointed officials span all CDA goals. The definitive cost of governance, including the activities of CDA departments which provide for and facilitate it, has been more clearly identified, and requires further examination against the current structure of corporate, licensing, and individual member fees.

Following direction from the 1992 Planning Session, the fee structure and its rationale was examined through comparison of services provided against revenue sources. The draft fee payment formula is appended to the Management Committee report and as indicated, has been referred to the Working Group on Membership Concerns for examination and recommendation.

The practice of scheduling an Interim and Annual Meeting of Governors was reviewed, and judged to be necessary in terms of proactivity and responsiveness. Streamlining of Board meetings will be addressed through Interim Sessions of one day's duration. As Governors are aware, the 1993 Interim Meeting has been scheduled for May 1, 1993 in Toronto. This pattern will be followed in 1994.

19. **CDA Code of Ethics**

Following its approval by the Board of Governors in 1991, the CDA Code of Ethics was distributed to all individual CDA members, Corporate Members, Canadian Dental Faculties, and other affiliated dental organizations. The Code is also provided annually to senior dental students through the graduation package. The CDA has communicated with those teaching ethics in the dental schools to ensure optimum awareness of the availability of the Code as a teaching resource.

20. **Professional Resource Utilization**

The 1986 CDA manpower conference concluded with a recommendation that CDA establish an Ad Hoc Committee "to study the present resource situation and present recommended solutions to the CDA Board of Governors". The Professional Resource Utilization Committee (PRUC) was established, and under its mandate manpower studies were updated, a Delphi exercise was conducted, and recommendations for reductions to the number of entrants to Canadian schools were formulated. Since that time, increased numbers of Canadians attending U.S. dental schools, existing and future free trade agreements, and questions on licensure within Canada have added to the complexity of the supply and demand equation.

In 1990, a Sub-Committee met to examine the CDA's role in the area of professional resource utilization, including data collection and forecasting. The report presented to Executive Council identified the need for an overall conceptual approach, that would identify and monitor the many factors that impact on the effective demand for dental care. Subsequent requests from PRUC for funding to pursue this direction were unsuccessful. However, CDA and federal government resources have been committed to facilitate the ongoing work of the National Dental Epidemiological Project.

The recognition that professional resource utilization is an important element in the provision of optimal, accessible oral health care for Canadians, must be balanced with the fact that CDA's mandate does not include the provision of funding for basic research. Executive Council believes that the original mandate of PRUC has been satisfied. Future CDA activities will concentrate on encouraging research, monitoring its conclusions and examining other factors bearing on this topic. The ongoing responsibility for this area has been assigned to the Committee on Community and Institutional Dentistry.

21. **Council on Education/Sub-Committee on Continuing Education**

The mandate of the Sub-Committee on Continuing Education of the Council on Education was discussed, and an apparent overlap was identified between the Sub-Committee and the Seminar Program proposed by the Membership Services Committee. Centralization of continuing education programs within the Membership Services area will be examined, with a view to elimination of redundancy and increased efficiency.

22. **Journal/Publications**

The Journal and Communiqué have been examined with a view to repositioning information provided to members and non-members. The Communiqué will be developed as a member report, becoming a news vehicle for CDA. The content of this members-only publication will combine some features of the current Communiqué and Journal. It will include articles featuring what CDA is doing for the profession (from a news perspective), and happenings in dentistry across the country. While it will carry the look and format of a "news publication" its ultimate mandate will be to profile CDA as a service organization, and provide useful and valuable information to the membership. Suggested features include: Women in Dentistry, Native Dentists, Geriatrics, and New Graduates. Suggested topics on practical dentistry include Infection Control, Composites, Office Design, Malpractice, and Recall Systems. Further information can be found in the report of the Communications Steering Committee.

23. **Dental Awareness Program (DAP)**

CDA's current financial commitment in support of the Dental Awareness Program currently stands at approximately \$80,000 a year. For the most part it is expended on outside consulting services relative to participation in the Canada Health Monitor, corporate sponsorship relationships such as the Pentathlon, and product development for the pamphlet program.

Provincial Associations have become very active in the field of dental awareness, including the promotion of Dental Health Month. CDA's commitment to the Dental Awareness Program will continue under the direction of the Communications Steering Committee; its role in Dental Health Month will be reduced to providing resources to assist the smaller provinces, on an as-required basis.

24. **Public Affairs**

CDA public affairs activities should be strengthened through a more aggressive public relations program to promote CDA to Canadians, thereby achieving increased public profile for the CDA. Current staff resources will be examined and, if necessary, re-allocated to provide an increased degree of support for this area.

25. **Merchandise Program**

The Merchandise Program will be reviewed, and the product line tailored to provide those appropriate to CDA's mandate. Review of this program will include investigation of the feasibility of a turn-key operation, to achieve a reduction in overhead costs.

26. **Coordination of Internal Operations**

Various administrative staff functions are decentralized among CDA departments. These include arrangements for publication, printing and distribution of products and materials, and meeting planning. Administrative staff functions within CDA will be examined, to determine whether cost efficiencies can be achieved through centralization without loss of effectiveness and appropriate control.

27. **Board Representation - ODA**

Statistics submitted by the Ontario Dental Association as of July 31, 1992 identified sufficient numbers of affiliate members in Ontario to require the appointment of an affiliate governor, under the current By-Laws. As stipulated in the By-Laws, the governor so appointed would have been seated at the 1992 Annual and 1993 Interim Meeting. Correspondence with the ODA and the RCDS on the appointment of an affiliate governor generated a request from the ODA for clarification of the statistics. As this matter was still under discussion just prior to the 1992 Annual Meeting, the appointment of an affiliate governor was delayed. Subsequent review of statistics have validated the required numbers to appoint an affiliate governor from Ontario.

Executive Council stressed its support of organized dentistry at all levels, and declared that it must be fostered among all members of the dental profession. Council was also cognizant of the fact that CDA By-Laws should not be utilized as a mechanism to discourage support of organized dentistry at the local, provincial or national level. It was Council's decision that a watching brief be maintained on the statistics regarding CDA affiliate members, and that appointment of an affiliate governor from any province must meet the test of being in the national interest of the profession.

The Council on Constitution and By-Laws was requested to prepare a By-Law amendment in this regard for consideration at the 1993 Interim Meeting. In addition, Council was asked to comment and provide advice on Executive Council's authority to delay an action required under the current By-Laws. Appropriate recommendations are contained in the report of the Council on Constitution and By-Laws. Council has informed Executive Council that the By-Laws do not speak to the issue of delaying appointment of Governors. It was noted that there is no indication of a time limit for the appointment of Affiliate Governors.

28. **CDA Annual Dental Meeting**

Discussion with Revenue Canada - Taxation through the CDA Taxation Committee, has identified that legitimate tax deductions relative to continuing education expenses are applicable to the CDA Convention. The discussion also stressed that the word "Convention" itself is often a deterrent to such claims, as it has a connotation other than that of continuing education. As a result of the foregoing, the CDA Convention will henceforth be known as the "CDA Annual Dental Meeting" commencing with the 1994 Meeting. Executive Council requested that the By-Laws be reviewed, for appropriate amendments.

29. **CDHA Position Statement on Management of Dental Hygiene Care**

The Board of Directors of the Canadian Dental Hygienists' Association has approved a statement on the Management of Dental Hygiene Care. The statement was included in the CDHA's report to the 1992 Annual Meeting of Governors, but was not available to Executive Council at its Pre-Board Meeting. The Executive Council has now received and reviewed the statement, along with concerns expressed by provincial dental associations. The CDA response to the Position Statement is based on the principle that it does not meet the parameters of comprehensive care provided in the best interest of the patient. A letter was sent to CDA members outlining CDA's concerns with the Position Statement, and suggesting that they discuss it with their hygienists, to assist them in developing an awareness of positions taken by CDHA. The communication stressed the responsibility of all health care professionals to act in the patients' best interest. Copies of this correspondence was provided to provincial departments of health, and CDA Corporate Members.

30. **FDI - 1994**

Dr. Jahjah, General Chairman of Conventions reported to Executive Council on activities and ongoing discussions with the FDI Executive, towards finalizing a working agreement between CDA and FDI for World Congress 1994. Two essential elements have determined CDA's position with regard to the working agreement - financial risk and control. The Executive Council is satisfied that these elements are being satisfactorily addressed. Sensitivities of ongoing negotiations with FDI dictate confidentiality of specifics for the immediate future.

The 1994 FDI Organizing Committee will comprise Dr. Michel Jahjah, General Chairman and Drs. Marcia Boyd, Bob Clarke, Ron Markey and Jim Stich - members.

31. **CDA Appointments**

Since the 1992 Annual Meeting, the President, Dr. Bernard Dolansky has made the following appointments:

- Dr. Bryun Sigfstead of Edmonton, Alberta has been appointed Chairman of Government Relations Committee, and the Committee on Nominations, Awards and Trusts.
- Dr. Richard Sandilands of Edmonton, Alberta has been appointed as the Alberta representative to Executive Council, fulfilling the unexpired term of Dr. Bryun Sigfstead.
- Dr. Mac Balfour of Oakville, Ontario has been appointed Chairman of the Council on Constitution and By-Laws.
- Miss Mahnaz Fatahzadeh of Vancouver, B.C. has been appointed Chairman of the Student Affairs Committee.
- Dr. Derek Jones of Halifax, Nova Scotia has been appointed Chairman of the Committee on Dental Materials and Devices.
- Dr. Wayne Steggles of Smith Falls, Ontario has been appointed Chairman of the Committee on Community and Institutional Dentistry.
- Dr. Rod Moran of Toronto, Ontario has been appointed Chairman of the Council on Insurance and Investment.
- Dr. Ian Vogan of Halifax, Nova Scotia has been appointed as the Dental Specialties representative to the Commission on Dental Accreditation.
- Mr. Alf Dolan of Belfontaine, Ontario has been appointed as the Canadian Hospital Association's representative to the Committee on Community and Institutional Dentistry.

Dr. Bernard Dolansky of Ottawa, Ontario has assumed the Chairmanship of Management Committee and Executive Council, by virtue of office.

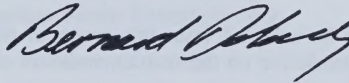
32. **President's Activities**

The schedule of the activities of the President was presented to Governors for information. The final schedule is appended to the Executive Council report to the Annual Board of Governors Meeting.

33. **Council and Committee Reports**

Executive Council has reviewed Council and Committee reports as appended, and other matters requiring Board action follow therein.

Respectfully submitted,



Bernard Dolansky, B.A., D.D.S., M.S.
Chairman, Executive Council

FILING OF REPORT

The Board of Governors accepts with appreciation the report of Executive Council.

TERMS OF REFERENCE

WORKING GROUP ON MEMBERSHIP CONCERNS

MEMBERSHIP

The CDA Working Group on Membership Concerns will be an ad hoc committee of the Executive Council, comprised of five dentist members. Geographic consideration will be made in selecting committee members so that the following regions are represented:

Ontario
Quebec
Pacific Coast
Atlantic Canada
Prairies

The Chairman will be selected from this group of five, and shall be appointed by the President of the Association on the recommendation of Executive Council.

The Committee will function for a fixed term as designated by Executive Council, and will meet as appropriate, based on budgetary considerations.

DUTIES

The mandate of the Committee will be to:

1. review and assess the CDA membership status in each province, and the relationship of the provincial association to government and to the CDA;
2. develop plans and strategies for those provinces that are currently mandatory, to remain mandatory;
3. develop plans and strategies for those provinces that are mandatory, should that status become threatened;
4. explore how those provinces that are voluntary can possibly become mandatory in their requirement for CDA membership;
5. review CDA's fee structure for individual dentists, corporate members and licensing bodies, and explore ways for CDA to broaden its financial base.

Approved by the
CDA Board of Governors
May, 1993

**TERMS OF REFERENCE
COMMITTEE ON COMMUNITY AND INSTITUTIONAL DENTISTRY**

MEMBERSHIP

The Committee on Community and Institutional Dentistry shall reflect in its composition, representation of the major geographic regions of Canada and shall consist of 9 members plus Executive Liaison, as follows:

- . 2 general dental practitioners
- . 1 oral and maxillofacial surgeon
- . 1 oral pathologist/biologist
- . 1 representative of public health dentistry
- . 1 representative of pediatric dentistry
- . 1 representative of dental auxiliaries
- . 1 representative of the Canadian Hospital Association
- . **1 representative of the Canadian Forces Dental Services**
- . Executive Liaison

DUTIES

1. To foster and encourage by appropriate means all methods of reducing and preventing oral disease.
2. To monitor and review developments in dental practice within institutions as well as the wider community.
3. **To monitor and review developments with respect to professional resource utilization.**
4. To develop guidelines and resources to assist practitioners in both settings to respond to new developments and to practice safely, efficiently and professionally.
5. To work in cooperation with other CDA Committees, dental practitioners, the dental specialties, hospital administration and the medical profession as required to monitor developments and produce guidelines and resources.
6. To advise the CDA Board of Governors on issues related to the practice of dentistry within institutions as well as the wider community.
7. To act upon any related matters that may from time to time be assigned by the Executive Council.

Approved by the
CDA Board of Governors
May, 1993

TERMS OF REFERENCE

**CONTINUING EDUCATION COMMITTEE
of the
COUNCIL ON EDUCATION**

MEMBERSHIP

The Continuing Education Committee shall consist of four members, and shall meet as directed and required. In electing the membership of the Committee, the Council on Education will ensure that representation is constituted as follows:

- (4) Four persons with experience or interest in continuing education.

The Chairman, a member of the Continuing Education Committee, shall be appointed annually by the President of the Association on the recommendation of Executive Council.

Membership on the Continuing Education Committee shall be staggered, for a term of three years, once renewable.

DUTIES

It shall be the duty of the Continuing Education Committee to:

- i) Assist the Canadian Dental Association in determining and fulfilling its role in continuing education.
- ii) Review issues, initiatives, and developments in dentally-related continuing education and continuing competence and make appropriate recommendations to the Council on Education and assist Council in implementing such recommendations.
- iii) Develop related studies, programs and projects with the approval of the Council on Education.
- iv) Present an annual report to the Council on Education.
- v) Conduct such other tasks as the Council on Education may direct from time to time.

Approved by the
Board of Governors
Canadian Dental Association
May, 1993

TERMS OF REFERENCE
DENTAL ADMISSIONS COMMITTEE
of the
COUNCIL ON EDUCATION

MEMBERSHIP

The Dental Admissions Committee shall consist of five members, and shall meet as directed and required. In electing the membership of the Committee, the Council on Education will ensure that representation is constituted as follows:

- (5) Five persons with dental school admissions experience and/or interest

The Executive Liaison to the Council shall be invited to Committee meetings.

The Chairman, a member of the Dental Admissions Committee, shall be appointed annually by the President of the Association on the recommendation of Executive Council.

Membership on the Dental Admissions Committee shall be staggered, for a term of three years, once renewable.

A representative of the American Dental Association may be requested to sit as a consultant to the Dental Admissions Committee.

Consultants or advisers may be utilized subject to Council on Education approval and the availability of financial resources.

DUTIES

It shall be the duty of the Dental Admissions Committee to:

- i) Recommend policy regarding administration of the Dental Aptitude Test and the distribution of its results.
- ii) Assist in interpretation of the Dental Aptitude Test results.
- iii) Support the development of the Dental Aptitude Test and other potential test components.
- iv) Support or encourage ongoing evaluation and validation relevant to the Dental Aptitude Test program.

TERMS OF REFERENCE

page 2

DENTAL ADMISSIONS COMMITTEE of the COUNCIL ON EDUCATION

DUTIES (continued)

- v) Collect and exchange data and information relative to the establishment of a national database on applicants and admissions in cooperation with the Canadian Faculties of Dentistry, subject to Council on Education direction.
- vi) Undertake activities that would support recruitment and selection of qualified applicants.
- vii) Present an annual report to the Council on Education.
- viii) Conduct such other tasks as the Council on Education may direct from time to time.
- ix) Advise on an appropriate fee structure for the Dental Aptitude Test and related items.
- x) Advise the Nominating Committee of the Council on Education on qualified and potential members, advisers and consultants.

Approved by the
Board of Governors
Canadian Dental Association
May, 1993

TERMS OF REFERENCE

NOMINATING COMMITTEE
of the
COUNCIL ON EDUCATIONMEMBERSHIP

The Nominating Committee shall consist of three members plus the Director of Education and Accreditation, who shall act as staff support and secretary to the Committee. In appointing the membership of the Committee, the Chairman of the Council on Education will ensure that representation is constituted as follows:

- (1) The Chairman of the Council on Education shall be nominated as the Chairman of the Nominating Committee
- (2) Two persons from the Council on Education
- (3) The Director of Education and Accreditation as Secretary

The Chairman of the Nominating Committee shall be appointed annually by the President of the Association on the recommendation of Executive Council.

Membership on the Nominating Committee shall be staggered, for a term of three years, once renewable.

DUTIES

It shall be the duty of the Nominating Committee to:

- i) Solicit and maintain a roster of names and qualifications of individuals for possible membership on committees of the Council and to advise Council with respect to possible Chairpersons of standing committees of Council.
- ii) Prepare a list of all elective positions to be filled, excluding those for the Nominating Committee, and submit this list sixty (60) days before the annual meeting of the Council on Education.
- iii) Submit an annual report, listing eligible nominees for each open elective position sixty (60) days prior to the annual meeting of the Council on Education. The annual report is to be included with other committee reports for advance distribution prior to the annual meeting.
- iv) Conduct such other nominating tasks as the Council on Education may direct from time to time.

Amendment to 1993 Participation Agreement**9. Surplus**

In directing and controlling the administration of the Plans, CDA, through its Executive Council, shall adopt the policy (i) of making use of surpluses arising under any Benefit Plan for the benefit of the Benefit Plans or any one or more of them and the Participants therein, and (ii) of making use of surpluses arising under any Plan other than a Benefit Plan for the benefit of such Plan and the Participants therein, through the reduction of premiums, the improvement or addition of benefits, the payment of dividends or otherwise.

As soon as reasonably possible following its receipt of the audited annual financial statements for the CDIP Plans, the CDSPI Board of Directors shall be directed by the CDA to prepare and submit to the CDA Executive Council its recommendations concerning the use of the surplus funds of the Benefit Plans (if any) existing at the end of the immediately preceding calendar year. Upon receipt of such recommendations the CDA Executive Council shall review the status of the surplus funds (if any) and such recommendations and make a decision as to the use of the surplus funds.

CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

FINANCIAL STATEMENTS

Year Ended May 29, 1992

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Clarke
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AUDITORS' REPORT

TO THE BOARD OF GOVERNORS OF THE CANADIAN DENTAL ASSOCIATION
TRUSTEES FOR THE PARTICIPANTS IN THE CANADIAN DENTAL ASSOCIATION
RETIREMENT SAVINGS PLAN

We have audited the statement of financial position and investment portfolios of the Canadian Dental Association Retirement Savings Plan as at May 29, 1992 and the statements of income and changes in net assets for the year then ended. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position and investment portfolios of the Plan as at May 29, 1992 and the results of its operations and the changes in its net assets for the year then ended in accordance with generally accepted accounting principles.

Clarke Henning & Co.
CHARTERED ACCOUNTANTS

Toronto, Ontario
July 3, 1992

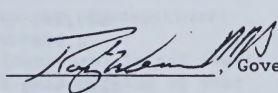
CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

STATEMENT OF FINANCIAL POSITION

As at May 29, 1992

ASSETS	1992	1991
BOND & MORTGAGE FUND		
Investments, at market value		
Mortgage fund units	\$ 2,797,896	\$ 2,474,799
Bonds	32,683,888	20,236,438
Cash and short term deposits	2,879,855	4,785,245
Accrued income	603,881	653,845
	<u>38,965,520</u>	<u>28,150,327</u>
COMMON STOCK FUND		
Investments, at market value		
Common stocks	36,628,990	31,288,733
Cash and short term deposits	3,961,110	3,377,332
Accrued income	127,070	137,189
	<u>40,717,170</u>	<u>34,803,254</u>
MONEY MARKET FUND		
Investments, at market value		
Bonds	3,708,258	698,250
Cash and short term deposits	25,646,955	22,177,442
	<u>29,355,213</u>	<u>22,875,692</u>
BALANCED FUND		
Investments, at market value		
Diversified fund units	15,737,566	10,014,906
Cash and short term deposits	43,008	113,658
	<u>15,780,574</u>	<u>10,128,564</u>
G.I.C. FUND		
Investment certificates of The Imperial Life Assurance Company of Canada including accrued interest	39,184,022	45,335,572
TOTAL ASSETS OF THE PLAN REPRESENTING PARTICIPANTS' INTEREST	<u>\$164,002,499</u>	<u>\$141,293,409</u>

Approved on behalf of Canadian Dental Association:

 Governor

 Governor

CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

STATEMENT OF INCOME

Year ended May 29, 1992

	1992	1991
BOND & MORTGAGE FUND		
Income		
Interest - bonds	\$2,483,758	\$1,909,561
- cash and short term deposits	311,483	236,263
Gain (loss) on sale of investments	<u>2,082,076</u>	<u>(56,359)</u>
	4,877,317	2,089,465
Expenses		
Administration fees	324,289	229,055
Other	<u>5,010</u>	<u>3,500</u>
	329,299	232,555
	<u>4,548,018</u>	<u>1,856,910</u>
COMMON STOCK FUND		
Income		
Dividends	1,104,175	1,181,247
Interest - cash and short term deposits	304,920	682,959
Gain on sale of investments	<u>599,507</u>	<u>1,213,346</u>
	2,008,602	3,077,552
Expenses		
Administration fees	357,674	288,665
Other	<u>5,278</u>	<u>4,500</u>
	362,952	293,165
	<u>1,645,650</u>	<u>2,784,387</u>
MONEY MARKET FUND		
Income		
Interest - bonds	48,196	80,049
- cash and short term deposits	<u>2,137,169</u>	<u>1,954,945</u>
	2,185,365	2,034,994
Expenses		
Administration fees	152,832	109,620
Other	<u>3,733</u>	<u>1,500</u>
	156,565	111,120
	<u>2,028,800</u>	<u>1,923,874</u>
BALANCED FUND		
Expenses		
Administration fees	120,366	94,743
Other	<u>2,078</u>	<u>8,860</u>
	(122,444)	(103,603)
G.I.C. FUND		
Interest income	<u>\$4,308,057</u>	<u>\$4,773,769</u>

CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

STATEMENT OF CHANGES IN NET ASSETS

Year ended May 29, 1992

	1992	1991
<i>BOND & MORTGAGE FUND</i>		
Net deposits	\$ 6,625,729	\$ 1,615,945
Net income	4,548,018	1,856,910
Change in market value of investments	<u>(358,554)</u>	<u>1,784,520</u>
Increase in net assets	10,815,193	5,257,375
Net assets at beginning of year, at market value	28,150,327	22,892,952
Net assets at end of year, at market value	<u>38,965,520</u>	<u>28,150,327</u>
Unit value	<u>94.54347</u>	<u>83.13476</u>
<i>COMMON STOCK FUND</i>		
Net deposits (redemptions)	4,731,152	(522,406)
Net income	1,645,650	2,784,387
Change in market value of investments	<u>(462,886)</u>	<u>(971,747)</u>
Increase in net assets	5,913,916	1,290,234
Net assets at beginning of year, at market value	34,803,254	33,513,020
Net assets at end of year, at market value	<u>40,717,170</u>	<u>34,803,254</u>
Unit value	<u>17.76105</u>	<u>17.15895</u>
<i>MONEY MARKET FUND</i>		
Net deposits	4,468,440	3,348,484
Net income	2,028,800	1,923,874
Change in market value of investments	<u>(17,719)</u>	<u>272,553</u>
Increase in net assets	6,479,521	5,544,911
Net assets at beginning of year, at market value	22,875,692	17,330,781
Net assets at end of year, at market value	<u>29,355,213</u>	<u>22,875,692</u>
Unit value	<u>60.75029</u>	<u>56.17419</u>
<i>BALANCED FUND</i>		
Net deposits (redemptions)	4,712,840	(1,282,108)
Net loss	(122,444)	(103,603)
Change in market value of investments	<u>1,061,614</u>	<u>818,678</u>
Increase (decrease) in net assets	5,652,010	(567,033)
Net assets at beginning of year, at market value	10,128,564	10,695,597
Net assets at end of year, at market value	<u>15,780,574</u>	<u>10,128,564</u>
Unit value	<u>35.55256</u>	<u>32.60375</u>
<i>G.I.C. FUND</i>		
Net deposits (redemptions)	(10,459,607)	1,125,229
Net income	4,308,057	4,773,769
Increase (decrease) in net assets	(6,151,550)	5,898,998
Net assets at beginning of year	45,335,572	39,436,574
Net assets at end of year	<u>\$39,184,022</u>	<u>\$45,335,572</u>

CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

INVESTMENT PORTFOLIOS

As at May 29, 1992

BOND & MORTGAGE FUND

UNITS	NO. OF UNITS	COST	MARKET VALUE
The Imperial Life Assurance Company of Canada Pooled Mortgage Fund Units	26,281	\$ 924,258	\$ 2,797,896

BONDS	PAR VALUE	COST	MARKET VALUE
Government of Canada			
September 6, 1993 - 8.75%	1,000,000	1,023,950	1,025,000
February 1, 1994 - 10.25%	250,000	255,500	263,125
March 29, 1995 - 11.50%	500,000	543,750	542,800
March 1, 1996 - 10.25%	1,000,000	1,071,500	1,075,000
October 1, 1996 - 9.25%	4,775,000	4,939,312	4,995,844
October 1, 1997 - 9.75%	2,550,000	2,620,175	2,722,125
October 1, 1998 - 9.50%	700,000	710,380	740,250
May 1, 2000 - 9.75%	850,000	887,825	906,313
September 1, 2000 - 11.50%	350,000	367,325	405,562
March 1, 2001 - 10.50%	625,000	716,563	691,406
June 1, 2001 - 9.75%	750,000	779,775	798,750
May 1, 2002 - 10.00%	1,500,000	1,606,200	1,621,875
March 15, 2014 - 10.25%	300,000	307,378	330,000
March 15, 2021 - 10.50%	2,625,000	2,832,946	2,956,407
		18,662,579	19,074,457

Provincial Bonds

Saskatchewan - 12.25% due June 5, 1995	250,000	252,750	275,937
Ontario Hydro - 10.875% due January 8, 1996	450,000	449,235	484,875
- 9.00% due April 22, 1996	475,000	429,281	485,094
Ontario - 10.25% due October 3, 1996	2,650,000	2,776,025	2,818,937
Saskatchewan - 10.125% due July 3, 1998	450,000	471,150	470,813
Alberta - 9.60% due July 7, 1998	300,000	302,625	313,500
Quebec Housing Corp.			
- 10.50% due October 20, 1998	250,000	249,062	270,125
Saskatchewan - 11.25% due July 12, 2000	550,000	543,400	602,250
Manitoba - 11.00% due August 15, 2000	325,000	323,375	357,562
British Columbia			
- 10.15% due August 29, 2001	500,000	498,750	532,500
Manitoba - 9.625% due September 3, 2002	625,000	630,219	657,031
- 9.75% due May 15, 2011	350,000	349,562	365,750
Ontario Hydro - 10.125% due October 15, 2021	1,700,000	1,778,333	1,748,875
		9,053,767	9,383,249

CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

INVESTMENT PORTFOLIOS

As at May 29, 1992

BOND & MORTGAGE FUND (continued)

BONDS	PAR VALUE	COST	MARKET VALUE
Corporate Bonds			
Bell Canada - 10.00% due June 15, 2000	\$ 500,000	\$ 434,200	\$ 523,125
Bank of Montreal			
- 10.60% due December 20, 1998	250,000	248,000	268,750
Bombardier Inc. - 11.10% due May 15, 2001	300,000	303,750	322,125
Canadian National Railway			
- 12.25% due May 1, 2005	562,000	559,190	616,795
Maritime Telegraph and Telephone			
- 9.90% due May 1, 1997	1,000,000	1,020,000	1,042,500
Royal Bank of Canada			
- 11.00% due January 11, 2002	250,000	259,075	270,938
- 10.50% due March 1, 2002	350,000	350,000	369,687
Royal Trust - 8.625% due April 1, 1997	825,000	812,262	812,262
		<u>3,986,477</u>	<u>4,226,182</u>
TOTAL BONDS		<u>31,702,823</u>	<u>32,683,888</u>

COMMON STOCK FUND

CANADIAN EQUITIES	NO. OF SHARES		
Communications and Media			
Electrohome Ltd. Class Y	24,700	155,857	145,113
Quebecor Inc. Class B	27,500	352,495	388,437
Shaw Cablesystems Ltd. Class B	50,000	283,333	843,750
Thomson Corporation	30,000	351,723	450,000
Torstar Corp. Class B	20,000	478,200	430,000
		<u>1,621,608</u>	<u>2,257,300</u>
Consumer Products			
Corby Distilleries Ltd. Class A	15,000	301,050	750,000
Labatt (John) Ltd.	21,000	573,038	556,500
Maple Leaf Foods, Inc.	19,000	234,662	315,875
Molson Companies Ltd. Class A	15,000	370,537	517,500
Oshawa Group Ltd. Class A	23,700	572,071	411,787
Rothmans Inc.	8,200	394,873	729,800
Seagram Co. Ltd.	51,200	1,747,159	1,824,000
		<u>4,193,390</u>	<u>5,105,462</u>

CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

INVESTMENT PORTFOLIOS

As at May 29, 1992

COMMON STOCK FUND (continued)

CANADIAN EQUITIES	NO. OF SHARES	COST	MARKET VALUE
Financial Services			
Bank of Montreal	34,500	\$ 1,090,234	\$ 1,530,938
Bank of Nova Scotia	67,000	1,098,023	1,381,875
Canadian Imperial Bank of Commerce	36,000	819,975	958,500
Royal Bank of Canada	53,000	1,419,100	1,232,250
Toronto Dominion Bank	32,000	<u>542,911</u>	<u>524,000</u>
		4,970,243	5,627,563
Gold and Silver			
American Barrick Resources	19,000	440,965	570,000
Hemlo Gold Mines Inc.	55,700	<u>640,191</u>	<u>501,300</u>
		1,081,156	1,071,300
Industrial Products			
Brascan Ltd. Class A	40,800	764,136	642,600
Moore Corp. Ltd.	37,000	811,040	934,250
Northern Telecom Ltd.	17,700	832,245	831,900
Nova Corp. of Alberta (Canada)	76,500	<u>607,407</u>	<u>659,813</u>
		3,014,828	3,068,563
Management Companies			
Canadian Pacific Ltd.	89,000	1,608,903	1,590,875
Horsham Corp.	30,000	<u>331,800</u>	<u>270,000</u>
		1,940,703	1,860,875
Merchandising			
Canadian Tire Corp. Ltd. Class A	25,500	551,916	455,812
Hudsons Bay Co.	31,400	865,550	942,000
Reitman's (Canada) Ltd. Class A	25,000	<u>370,250</u>	<u>443,750</u>
		1,787,716	1,841,562
Metals and Minerals			
Alcan Aluminum Ltd.	54,000	1,255,496	1,397,250
Cominco Ltd.	25,000	588,682	528,125
Metall Mining Corp.	40,000	489,226	495,000
Metall Mining Corp. Warrants	12,500	22,500	16,875
Noranda Inc.	35,000	<u>666,490</u>	<u>616,875</u>
		3,022,394	3,054,125

CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

INVESTMENT PORTFOLIOS

As at May 29, 1992

COMMON STOCK FUND (continued)

CANADIAN EQUITIES	NO. OF SHARES	COST	MARKET VALUE
Oil and Gas			
Canadian Occidental Petroleum Ltd.	26,000	\$ 305,500	\$ 344,500
Gulf Canada Resources	62,500	611,631	625,000
Imperial Oil Ltd.	24,000	950,965	1,077,000
Norcen Energy Resources	34,800	525,023	661,200
Petro-Canada	33,000	400,805	297,000
Renaissance Energy	37,100	548,150	561,138
		<u>3,342,074</u>	<u>3,565,838</u>
Paper and Forest Products			
Canfor Corp.	12,000	316,382	339,000
Pipelines			
Transcanada Pipelines Ltd.	40,000	702,429	675,000
Westcoast Energy Inc.	24,900	517,098	417,075
		<u>1,219,527</u>	<u>1,092,075</u>
Real Estate and Construction			
Markborough Properties Inc.	50,000	416,239	235,000
Trizec Corp., Ltd. Class A	22,000	292,380	108,900
		<u>708,619</u>	<u>343,900</u>
Transportation			
Laidlaw Inc. Class B	30,500	489,849	362,187
Utilities			
BCE Inc.	54,500	2,141,602	2,404,812
Transalta Utilities Corporation	54,166	656,474	690,617
		<u>2,798,076</u>	<u>3,095,429</u>
TOTAL CANADIAN EQUITIES (89.23%)		<u>30,506,565</u>	<u>32,685,179</u>

CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

INVESTMENT PORTFOLIOS

As at May 29, 1992

COMMON STOCK FUND (continued)

UNITED STATES EQUITIES	NO. OF SHARES	COST	MARKET VALUE
Basic Industries			
American Cyanamid Co.	1,500	\$ 112,506	\$ 107,520
Corning Inc.	3,000	106,992	134,625
Ethyl Corporation	4,000	104,568	139,745
Loctite Corporation	1,600	<u>64,532</u>	<u>90,112</u>
		388,598	472,002
Capital Goods			
Chemical Waste Management	1,500	42,875	33,204
Computer Associates International Inc.	6,000	113,757	104,809
Cooper Industries	2,500	126,422	151,717
General Electric Co.	2,000	156,587	184,018
Waste Management Inc., zero coupon due April 13, 2012	400,000	<u>122,650</u>	<u>165,044</u>
		562,291	638,792
Capital Goods - Technology			
Automatic Data Processing	2,400	79,691	131,553
Computer Sciences Corporation	1,500	121,486	137,562
E - Systems Inc.	3,000	129,193	128,752
Equifax Inc.	5,000	111,724	106,917
Intel Corporation	1,700	101,889	102,400
Microsoft Corporation	700	62,711	102,038
Sun Microsystem Inc.	2,100	40,648	70,520
Thermo Electron Corp.	3,000	<u>158,914</u>	<u>152,244</u>
		806,256	931,986
Consumer Growth			
Belmac Corp.	2,800	48,740	36,683
Grannett Inc.	2,000	96,000	114,748
Gillette Co.	2,000	80,368	119,566
Johnson & Johnson	900	24,762	105,035
Lilly (Eli) & Co.	1,400	123,651	111,314
Pepsico Inc.	3,500	77,475	153,900
Roberts Pharmaceutical	1,200	35,918	34,334
Smithkline Beecham Plc	2,000	<u>101,962</u>	<u>181,609</u>
		588,876	857,189
Credit Cyclical			
Federal National Mortgage Association	1,800	35,493	138,781

CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

INVESTMENT PORTFOLIOS

As at May 29, 1992

COMMON STOCK FUND (continued)

UNITED STATES EQUITIES	NO. OF SHARES	COST	MARKET VALUE
Defensive Consumer Staples			
Fingerhut Cos. Inc.	3,500	\$ 104,607	\$ 124,385
Michael Foods Inc.	2,000	42,023	28,311
Philip Morris Inc.	1,400	<u>82,571</u>	<u>130,710</u>
		229,201	283,406
Financial			
First Financial Management Corp.	4,000	138,775	137,938
Conglomerates			
Hanson Plc	5,000	103,170	127,999
Utilities			
American Telephone & Telegraph Co.	3,000	152,768	153,599
Pacific Telesis Group	1,600	91,936	78,788
Telefonos De Mexico S.A.	1,800	<u>114,545</u>	<u>123,331</u>
		359,249	355,718
TOTAL UNITED STATES EQUITIES (10.77%)		<u>3,211,909</u>	<u>3,943,811</u>
TOTAL COMMON STOCKS (100.00%)		<u>33,718,474</u>	<u>36,628,990</u>

MONEY MARKET FUND

	PAR VALUE		
Government of Canada			
Coupons, due November 1, 1992	\$ 2,275,000	2,160,772	2,214,888
Provincial			
Quebec - coupons, due November 29, 1992	446,250	427,492	432,350
Quebec - residual, due December 22, 1992	1,100,000	1,045,297	1,061,020
		<u>3,633,561</u>	<u>3,708,258</u>

BALANCED FUND

	NO. OF UNITS		
The Imperial Life Assurance Company of			
Canada Pooled Diversified Fund Units	226,252	<u>\$12,793,260</u>	<u>\$15,737,566</u>

CANADIAN DENTAL ASSOCIATION RETIREMENT SAVINGS PLAN

NOTES TO THE FINANCIAL STATEMENTS

Year ended May 29, 1992

1. Summary of significant accounting policies

The financial statements have been prepared in accordance with accounting principles generally acceptable for pooled trust funds. A description of accounting policies of particular significance is as follows:

Investments

Investments are stated at market value and are recorded as of the trade date. Market value is determined on the following basis:

- i) Stocks listed on a recognized stock exchange are valued at their closing sale prices on valuation date.
- ii) Bonds are valued at the average of bid and ask prices as of the valuation date.
- iii) Units of The Imperial Life Assurance Company of Canada are valued on the last business day of each week by dividing the total number of units of the Fund then outstanding into the net assets of the Fund, being the fair market value in Canadian funds of assets less liabilities as at the same date.

Valuation of units

Units are valued for the purposes of issue or redemption as at the close of business on the last business day of each week by dividing the total number of units of the Fund then outstanding into the net assets of the Fund, being the fair market value in Canadian funds of assets less liabilities as at the same date.

Income

Dividends are recognized as income on the ex-dividend date. Interest income is accrued at the stated rate of the debt security.

Contributions, transfers, terminations

All contributions, transfers and terminations made by the participants of the plan have been accounted for on an accrual basis.

Foreign currency translation

The purchase and sale of foreign investments and related foreign revenue and expenses are recorded in Canadian dollars using the exchange rates prevailing on the respective dates of such transactions. The market value of investments is stated at the prevailing rate of exchange on valuation day.

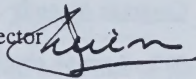


APPENDIX VI

MEMORANDUM

November 4, 1992

TO: Chairman and Members - Board of Governors
CEO's - Corporate Members

FROM: Jardine Neilson, Executive Director 

SUBJECT: **CDIP Plan Improvements - Life and LTD Plans**
- RSP Balanced Fund and Foreign Content

CANADIAN
DENTAL
ASSOCIATION
L'ASSOCIATION
DENTAIRE
CANADIENNE

OFFICE
OF THE
EXECUTIVE
DIRECTOR

CABINET
DU
DIRECTEUR
GÉNÉRAL

Attached for your information are copies of recommendations from the Council on Insurance and Investment relative to the above noted subject, which were approved by Executive Council at its October 30 meeting. A decision on these items was required of the Executive Council, in order that information on these items be included in promotional material relative to improvements in the plans and the RSP effective January 1, 1993.

This notice is provided in keeping with Article IX - Section 7 of the CDA Constitution and By-Laws. This information will also be provided in the Executive Council's report to the 1993 Interim Meeting.

c.c.: Mr. Kingsley Butler, Exec. Vice-President, CDSPI
Dr. Ron J. Markey, CDA member at large

/msg

RECOMMENDATIONS APPROVED BY EXECUTIVE COUNCIL
OCTOBER 30, 1992

CDIP Life Plan

That the maximum coverage for Basic Life Insurance be increased as follows, effective January 1, 1993, at no additional cost and, be promoted as a new CDIP benefit.

<u>Age</u>	<u>Coverage Amount</u>
------------	------------------------

65	50% of pre-65 coverage to a maximum of \$200,000.
70	50% of pre-70 coverage to a maximum of \$ 50,000.
75	50% of pre-75 coverage to a maximum of \$ 20,000.
80	Coverage terminates

CDIP LTD

THAT a Survivor Benefit equal to three times the last monthly benefit paid for the disability before the date of the Participant's death, be added to the CDIP LTD Plan effective January 1, 1993, and be promoted as a new CDIP benefit.

CDA RSP Balanced Fund

THAT the CDA RSP Balanced Fund be established as a Segregated stand-alone Fund, at no additional cost to the RSP, effectively immediately.

Foreign Content

THAT the Foreign Content parameters for the CDA RSP be set to match the maximum level stipulated by Revenue Canada for such investment vehicles.



MEMORANDUM

January 18, 1993

TO: Chairman and Members, Board of Governors

FROM: Jardine Neilson, Executive Director *J. Neilson*

SUBJECT: Motions approved by Executive Council on behalf of the Board of Governors

CANADIAN
DENTAL
ASSOCIATION
L'ASSOCIATION
DENTAIRE
CANADIENNE

OFFICE
OF THE
EXECUTIVE
DIRECTOR

CABINET
DU
DIRECTEUR
GÉNÉRAL

Following the December meeting of the Council on Insurance and Investment, the following recommendations were presented to CDA for approval. Executive Council approved the recommendations on behalf of the Board of Governors. These items will be presented in the Executive Council report to Governors, for review at the 1993 Interim Meeting.

As required by Article IX, Section 7 of the CDA Constitution and By-laws, the action taken by Executive Council on behalf of the Board of Governors is hereby reported.

CDA RSP Performance and Renewal

APPENDIX I

At the 1992 Annual Meeting, Governors adopted resolution #92.95 regarding the CDA RSP, contingent on a settlement with Laurentian Imperial by December 31, 1992.

THAT Scenario #2 as outlined in the Laurentian/Imperial letter of December 8, 1992, be accepted by the Canadian Dental Association regarding the settlement of all outstanding legal issues with Laurentian/Imperial; and

FURTHER THAT the CDA RSP be renewed with Laurentian/Imperial as Annuitant Contract holder for the four year period commencing January 1, 1993, with the same contract provisions and management fees as in the current contract.

Plan Improvements to TripleGuard

The following changes are being provided at no premium increase by Guardian, and are improvements to the coverage under Tripleguard.

THAT the CDIP Tripleguard Coverage maximums for professional fees, newly acquired property and hired automobiles be increased to \$25,000., \$100,000. and \$50,000. respectively, and a coverage for employee benefit administration liability be added; effective dates to be January 1, 1993.

c.c. CEOs - Corporate Members

Dr. Rod Moran, Chairman, Council on Insurance and Investment

Mr. Kingsley Butler, Executive Vice-President, CDSPI

Dr. Ron Markey, CDA Member at large, CDSPI

/sfb

APPENDIX I

CDA RSP Performance and Renewal

92.95 THAT the CDA RSP Variable Annuity Contract GA-8643 be renewed with Laurentian Imperial and Investment Management Services with Canagex Associate Inc. for the three years 1993, 1994 and 1995 at no fee increase, except for the required collection of GST on the CDSPI administration fee, based on the settlement of all outstanding items with Laurentian Imperial and Imperial Life by December 31, 1992, otherwise the contract will be for one year, renewable.

ADOPTED

NOTE: The two Governors representing the corporate member in Québec abstained.

CDAnet COMMITTEE

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Don MacFarlane, Chairman, British Columbia
Dr. Mac Balfour, Ontario
Dr. Bill Glave, Ontario
Dr. Toby Gushue, Newfoundland
Dr. Don Gutkin, Manitoba/Saskatchewan
Dr. Luc Dugal, Alberta
Dr. Timothy Comishin, British Columbia

Executive Liaison: Dr. Toby Gushue, Newfoundland

Staff: Ms. Patricia Duminy
Ms. Susan Matheson

1. Committee Meeting

The CDAnet Committee has met once since the report to the 1992 CDA Annual Board, October 18-19, 1992.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

2. CDAnet PLUS (CDAnet Value Added Services)

CDAnet continues their negotiations with VCS Technologies to finalize the CDAnet PLUS agreement. Discussions are going well, however, the negotiations are not yet complete.

3. CDAnet Statistics

Dr. MacFarlane updated CDA governors on the number of offices and dentists on CDAnet, per province as of April 22, 1993.

<u>Province</u>	<u>No. of Offices</u>	<u>No. of Dentists</u>
Alberta	110	184
BC	115	196
Manitoba	55	110
New Brunswick	8	13
Nova Scotia	13	34
Newfoundland	8	20
N.W.T.	1	6
Ontario	478	874
P.E.I.	1	1
Quebec	58	90
Saskatchewan	17	28
Yukon	0	0
	---	---
TOTALS	865	1555

The amount of revenue received for the CDAnet project as of January 25, 1993 is SHNS - \$23,716.82, ACE - \$20,948.43, totalling \$44,665.25. This total represents Royalties paid to CDAnet based on claims processed up to November 30, 1992, by SHNS and NDC.

4. CDAnet Certified Software Vendors

As of January, 1993, the following software companies have completed Certification with both networks and CDA;

Abel Computer Systems Ltd.	Alpha Bytes Computer Corp.
APG Computing Inc.	Autopia Computer Products
CDSPI	CLG Computer Consulting Inc.
Computer Station	Core Systems
Cortex Computer Systems	Dialog Medical Systems Inc.
DMS	Domtrak
Exan	Execu-dent
Genie (Ho & Assocs.)	Harr-Comm Technology
Logic Tech	Maxim
Medical Dental Data Systems	Norburn
Pharmaid	Zadall Systems Group Inc.

5. **Insurer Participation and Status**

The following insurance companies are processing claims on a REAL TIME basis:

Sun Life	Canada Life
Great West Life	Mutual Life
Confederation Life	Aetna
National Life	Alberta School Employee Benefit Plan

The following companies are processing claims on a BATCH basis:

Metropolitan Life, Manulife, Ontario Blue Cross

6. Dr. MacFarlane and representatives from the College of Dental Surgeons of B.C. have been meeting with MSA and CU&C to bring them into CDAnet. An impasse still exists but every effort is being undertaken to break this impasse. Dr. Dugal along with representatives of the Alberta Dental Association met with representatives of Alberta Blue Cross to encourage them to also join CDAnet.

7. **Marketing**

The CDAnet Booth has been scheduled as an exhibitor at the B.C. provincial dental meeting and the CDA Convention in Toronto.

8. **CDAnet Management Committee**

APPENDIX I

To facilitate communication relating to CDAnet and CDAnet PLUS (Value Added Services) a management committee has been struck. The Committee membership consists of the following CDA staff, The Director of Administration, Director of Communications, Director of Professional Services, CDA Librarian, Associate Director, Education & Accreditation, CDAnet Coordinator, Membership Services Manager, Information Systems Manager, and CDA Journal Editor. The CDAnet project impacts on various departments within CDA and this new endeavour will provide an effective mechanism for communication regarding CDAnet issues.

9. **Chairman's Remarks**

I wish to thank the Committee members for their continued efforts in the promotion and marketing of CDAnet. I also wish to thank Pat Duminy and Susan Matheson for their efforts in support of the CDAnet Committee.

Respectfully submitted,

Don MacFarlane, D.M.D.
Chairman, CDAnet Committee

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the CDAnet Committee as information.

CDAnet MANAGEMENT COMMITTEE

TERMS OF REFERENCE

1. Serve as a coordinating committee reporting to the Executive Director to ensure that administrative and staff initiatives required by board policy decision and directives are implemented through the appropriate CDA departments.
2. Identify and bring forward, issues requiring establishment or clarification of policy.
3. Coordinate the development of overall financial budgetary reports, analyses and projections.
4. Expedite interdepartmental communications and cooperation on initiatives, issues and questions related to CDAnet.
5. Assist the CDAnet Committee in liaison and communication with other interested CDA Committees.

February, 1993

COMMUNICATIONS STEERING COMMITTEE

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members: Dr. R. Wenn, Charlottetown, Chairman
Dr. J. Brookfield, Kirkland Lake
Dr. J. Diggins, Vancouver
Dr. T. Gushue, St. John's
Dr. B. Dolman, Montreal (Observer)

Coordinator: Miss Linda Teteruck

1. **Committee Meetings**

The Committee has met once since the last Board meeting - on January 10, 1993.

ITEMS REQUIRING BOARD ACTION

2. **Exclusivity of Member Benefits**

Both the Steering Committee and its sub-committee, the Membership Committee, have spent considerable time reviewing current CDA member services and how they can be better utilized and promoted to encourage membership in CDA. There is a strong feeling on both committees that when and where possible, CDA member benefits should be for members only with no access or cost differential to non-members. Committee members feel that as long as non-members can access CDA services and pay a differential, they will continue to do this and may not take out membership in the Association. In addition, non-member access calls into question the value of CDA membership to those who are members and who contribute to the overall administration of programs and services. Restricted access, however, does not preclude CDA from aggressively marketing and promoting its programs and services to non-members and establishing an introductory package or trial period for certain services to allow non-members to preview the benefits of belonging to CDA.

RESOLVED:

93.10 WHEREAS both the CDA Communications Steering Committee and Membership Committee feel that all CDA member benefits should be available exclusively to CDA members (except where ruled by exception), and

WHEREAS membership recruitment and retention is a priority for CDA and must be the driving force of the member services program,

BE IT RESOLVED

THAT the principle of exclusivity (except where ruled by exception) be applied to all member services, whether offered electronically or in print.

ADOPTED

The Committee suggested that this recommendation be reviewed annually.

In reviewing all the existing member benefits, it was the Committee's recommendation that the following benefits are exclusive for members only:

- Corporate hotel rates
- Sterilizer monitor program
- Affinity card
- CDA leasing
- Credit card merchant rates
- CDA travel services

Any new benefits that CDA introduces will also be exclusive, unless stated otherwise.

The Steering Committee fully recognizes that some benefits are available to non-members as a result of contractual agreements between CDA and the provinces. These include the Canadian Dentists' Insurance Program and CDAnet claims processing. Other CDA materials are distributed to non-members for financial reasons and to fulfil CDA's commitment, as outlined in its mission statement, to serve the profession as a whole and ultimately the Canadian public. The CDA Journal and corporately sponsored programs are examples in this category.

There was, however, considerable discussion on access by non-members to the CDA Library/Resource Centre. Currently non-member access is possible upon payment of a premium. The Committee feels that the library is one of CDA's premier services and with the increasing emphasis on CDA becoming the authoritative information source for the profession.

RESOLVED:

- 93.11 THAT the CDA library service remain exclusive to CDA members.**

ADOPTED

It was agreed, however, that the library was one area where an introductory package or trial period of service would work well, as a means of marketing and introducing CDA to non-members. It is also noted that non-member use of the library is infrequent.

It was further agreed that library staff should service all library requests whether on-line or through more traditional means.

It was noted that since the library falls within the purview of the Canadian Dental Foundation, there is an inherent responsibility to serve the needs of the public. This responsibility is dealt with through inter-library loan activities.

This discussion generated an overall review of non-member access to CDA information. One of the main benefits of CDA membership is reliable and timely information on topics of interest to dentists. When and where possible, non-member access should be restricted. Receipt of this type of information should be promoted and viewed as a privilege of membership.

CDA's responsibility to the profession as a whole and to the public is realized through publication of policy statements and current information in the Journal. Eventually all of CDA's major initiatives and policy statements appear in the Journal. Members, however, receive this information in a more timely and detailed fashion through member-only publications such as the Communique, President's letters and special mailings.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION**3. CDAnet/Value Addeds**

Following a presentation by Dr. Don MacFarlane to the Membership Committee on CDAnet value-added, it was noted that the CDAnet Committee is active in investigating programs and services that can go on-line. Many of these services parallel those being addressed by the Membership Committee. In addition, access by non-CDA members is being addressed in a different manner by each group.

For purposes of greater efficiency and co-ordination, particularly at a time when member benefits are being expanded and new benefits are being introduced, the Steering Committee has requested that the CDA Management Committee review the existing structure of both the Membership Committee and CDAnet Committee with a view toward merging and/or co-ordinating their functions.

It is suggested that one way of accomplishing this is to have the Membership Services Manager play a greater co-ordinating role.

4. **Co-Ordination of Travel Services and Benefits**

The development of travel benefits currently rests in two distinct management areas - the annual dental meeting and membership services. For negotiations purposes, it is important that certain travel programs remain with the annual dental meeting. Therefore, the membership services area will negotiate travel services for the general membership, and the Chairman of Conventions will negotiate travel connected with international and Canadian dental meetings, and continuing education.

Because of the limited use of this service and poor membership response, the Club Med travel benefit has been discontinued.

5. **Introduction of New Membership Services**

Three new services will be introduced to the membership as soon as possible. One is a phone and pay system whereby members can automate their payroll function through their phone system and the Toronto Dominion bank. The second is a pre-authorized payment program for new grads. The third new service being introduced to members in 1993 is Avis Rent-A-Car with CDA members receiving a 5%-10% discount on the lowest price that day.

The Compendium of Pharmaceuticals and Specialties was introduced as a member benefit to new grads in the fall of 1992. Thirty-one compendiums were sold to new grads at a reduced price of \$54.00 per copy. This benefit was available to members only. The Canadian Pharmaceutical Association is reluctant to allow CDA to introduce this as a new member benefit to the profession as a whole since the CPhA sells the compendium to over 1200 dentists each year at full price with approximately \$120,000.00 in revenues accruing to CPhA. CDA is investigating ways to retain this benefit for new grads with sponsorship as an option.

6. **Development of CDA Seminars**

Effort has been expended over the past year in developing and consolidating seminars for the profession on topics of national or practice interest. Currently CDA provides seminars in the areas of taxation and retirement planning (through CDSPI). Three new areas of seminar development are marketing dental health, dental practice management and patient trends and demographics. CDA has placed special emphasis on developing these seminars for senior students and new grads to assist them as they begin their professional life.

The Dental Consumer of the 90's seminar series (demographics) is being offered from February to April in five Canadian cities (Ottawa, Toronto, Montreal, Halifax and Vancouver) to practising members of the profession. The costs of the program are being underwritten by Ash Temple.

CDA's marketing dental health seminar has been presented for two years in a row to senior students at the University of Toronto. It has been well received and CDA

is currently investigating sponsorship for the seminars and for a video to either accompany the seminars or to stand alone.

The newest CDA initiative is practice management seminars for senior dental students, accompanied by corollary workbooks and materials. A one-day seminar is being developed in conjunction with ExperDent Consultants and will be piloted at four dental schools this spring (Toronto, Western, McGill and U.B.C.). It is anticipated that the seminar will be available at all ten dental schools in 1993-94. Corollary workbooks and materials will be available to new grads upon full and active membership in CDA and will be placed in CDA's inventory for sale to practising members of the profession. It is anticipated that the cost of this program will be funded by sponsorship and through the sale of materials to the profession.

7. **Update - CDA Membership Campaign**

To date (January 25, 1993), the 1993 membership campaign has yielded 2,207 active and affiliate members from Ontario, and 802 from Quebec. Total Ontario and Quebec active and affiliate members in 1992 were 2,601 and 1,071 respectively.

An update on membership figures was provided at the Interim Meeting of the Board.

The 1993 membership campaign features a number of new and expanded initiatives. These include:

- (1) More targeted mailings to members and non-members.
- (2) Special mailings and presentations to students and new grads. The pharmaceutical compendium was offered as a special benefit to 1992 grads. In addition, both first year and fourth year students were addressed during lecture or classroom time on the benefits of membership in CDA. A special speech and slide presentation was developed for use by members of Management and Executive Council when speaking to students about CDA.
- (3) Special new member "welcome to CDA" mailings.
- (4) Expanded information packages and recruitment literature. This included the 1992 annual review, and the new and expanded 1993 member services directory. For the first time, advertising was sought for the directory which allowed CDA to expand the information in the directory and profile membership suppliers.
- (5) The introduction of new member benefits such as phone and pay, pre-authorized payment, pro-rated payment, and Avis Rent-A-Car, during the membership campaign.
- (6) An expanded President's speaker tour, with emphasis in the Ontario market.
- (7) An expanded telemarketing campaign, which included CDA staff contact with members in November, to confirm receipt of membership invoices; senior and middle management staff contact with non-renewing dentists, in late January, and a blitz telephone campaign by members of Management Committee and other select dentists to non-renewals, in February.
- (8) Development of two special membership recruitment ads - one featuring the new CDA mission statement, and one featuring the hard core benefits of joining CDA.

While the focus of the membership campaign is in the voluntary provinces of Ontario and Quebec, many campaign activities encompass all the provinces and benefit all members of CDA. These include expanded information packages and recruitment literature, the full range of member benefits, membership certificates, cards and welcoming letters.

8. **CDA Working Committee on Membership Concerns**

It is noted that CDA is establishing an ad hoc working committee on membership concerns. The primary function of the working group will be to

- (i) Review and assess the CDA membership status in each province and the relationship of the provincial association to government and to the CDA;
- (ii) Develop plans and strategies for those provinces that are currently mandatory, to remain mandatory;
- (iii) Develop plans and strategies for those provinces that are mandatory, should that status become threatened;
- (iv) Explore how those provinces that are voluntary can possibly become mandatory in their requirement for CDA membership;
- (v) Review CDA's fee structure for individual dentists, corporate members and licensing bodies, and explore ways for CDA to broaden its financial base.

While it is noted that membership on the working group will not necessarily include members of the Membership or Steering Committees, both committees will be pleased to assist when and where possible.

9. **Dental Awareness Program/Dental Health Month**

Following on recommendations from the October planning session and in light of the emphasis that the provinces are placing on dental health month activities, CDA has decided to limit its DHM activities to sponsored activities that complement the Dental Awareness Program, and to support for those provinces that require CDA's assistance.

Because of the lack of interest by the provinces in continuing with the student poster contest, it will be discontinued in 1993. CDA's 1993 DHM activities will include the continued sale to corporate members and component societies of merchandise at special DHM rates, and two targeted programs funded by sponsors under the DAP. The "Eggception Eggsperiment" is a program sponsored by Proctor and Gamble that educates primary school teachers on the value of a fluoridated toothpaste by covering half an egg with toothpaste and immersing it in a light acid solution. Supplemental

teaching tools will be provided to teachers and students such as a poster to colour with Bob and the five point plan, and a poem. Proctor and Gamble have a complimentary ad currently appearing on TV.

The second sponsored program appearing during DHM is the helmet/mouthguard program sponsored by Sandoz. Each CDA member will receive literature on the value of mouth guards and helmets for their patients. A similar program was launched by the Canadian Medical Association to its members and was most successful.

Other DAP sponsored initiatives during 1993 include support from Ash Temple for the Dental Consumer of the 90's seminar series and Colgate's continuing support of the Dental Information System (DIS). They have generously provided CDA with \$100,000.00 in 1993 for the development of a series of complimentary fact sheets for the DIS and for continued promotion of the current materials. This is in addition to the \$125,000.00 provided CDA in 1992 and the \$270,000.00 in 1990-91.

Over the past year, CDA developed an extensive corporate sponsorship manual to assist in recruiting dollars for DAP programs, and continued with the Canada Health Monitor to measure utilization rates of dental services and other key consumer data.

Because of the limited dollars that are available for DAP programming, and the overall expense of polling initiatives, it is anticipated that CDA's use of the Canadian Health Monitor will decline in 1993.

10. Merchandise

1992 proved to be a successful year for CDA in the sale of products to the profession. The most successful product was CDA's new Dental Information System. Over 480,000 pamphlets were sold to the profession for distribution to patients, with revenues of over \$250,000.00. It is anticipated that the entire merchandise area will be reviewed within the next six months as CDA's order entry system is automated. Certain older products will be discontinued and with the development of the workbook and corollary materials for the practice management seminars and new DIS materials, it is anticipated that new products will be introduced.

11. **Dental Information System**

As mentioned, CDA's dental information system has been extremely popular with over 480,000 booklets distributed. Plans in 1993 call for the development of a series of complimentary fact sheets or short booklets with less text and more pictures or diagrams. Because of the concerns expressed by the specialty groups on their involvement in the development of materials that touch on their specialty, specialty groups will be approached about selecting a member to serve on CDA's review committee. The review committee will be responsible for vetting the new materials being developed this year, and for reviewing the current series scheduled for updating in 1994.

In light of specialist concerns on mention of their specialty in the current DIS materials, each booklet, as it comes up for reprinting, will be updated to include a reference to the relevant specialist or specialty.

12. **Publications - Journal/Communique**

1992 proved to be an exceptional year for the Journal. Although the final audited statements were not ready at the time of writing this report, it is anticipated that Journal revenues will exceed external expenses. This is a dramatic change from 1991 actuals which showed a net shortfall of over \$220,000.00. This change in the overall financial picture of the Journal is a direct result of bringing layout and design in-house through desk-top publishing, and the capable management skills of the Journal staff and most particularly, its Managing Editor, Terry Davis.

In addition, the Journal was able to increase its advertising pages from 262 to 271 in a tough recession year. This allowed the Journal the margins to print more pages and yet accomplish its financial objective of reducing the overall costs of publishing.

The new CDAaccess Ads were introduced in 1992 and as a result of Keith Health Care's able management of this area, classified advertising doubled from \$30,000.00 to \$60,000.00.

Plans in 1993 include maintaining a strong mix of scientific, clinical and practice management articles featuring renowned clinicians and experts in their field. The Journal will undergo an in-house redesign to make it look more contemporary, and included in this redesign will be an amalgamation of the CDA members-only Communique as a Journal insert. In order to increase the readership and

membership value of the Communique, it will be reformatted to a sixteen page, four colour publication featuring hands-on clinical and practice management articles by renown authors in their field, CDA news, updates, and information on membership services. While publication of the Communique in this new and revised format will not increase current expenses, a single sponsor is being sought to offset costs.

It is anticipated that the new Communique will be launched in March 1993 and will be published six times per year - in January, March, April, June, September and October (annual review issue).

13. **Library**

Under the able management of Mrs. Martha Vaughan, the library continues to expand its programs and services to members. The library receives over 530 member calls each month for a variety of information. In addition, the library receives 10 requests per week from other libraries for information. Since 1988, the library has charged for certain of its services. New charges were introduced in 1993 for both the monthly Table of Contents package and the SDI, current awareness bibliography. Overall access to the library and medline searches remain free to CDA members.

The library has recently undertaken a new program with Health and Welfare Canada to increase awareness by the profession of family violence. An extensive literature package is being developed for access through the CDA library, with Health and Welfare Canada funding its development.

This project is in addition to the library's ongoing work in bringing the collection on-line for access as a CDanet value added.

14. **Meeting with Provincial Communications Co-Ordinators**

Yearly meetings with provincial representatives to discuss communications activities and potential joint program initiatives continue to be informative and helpful for both CDA and the provinces. A meeting was held at the time of the 1992 Calgary convention and it is anticipated that another meeting will be held at the time of the CDA Toronto convention.

15. **Imagine Campaign**

As reported at the last meeting, the Steering Committee is pleased to support CDA's involvement and endorsement of the principles of the Imagine Campaign to promote charities and charitable attitudes in the professional community. No specific charities are earmarked. The campaign solely promotes the spirit of giving by the profession and by the community as a whole.

16. **Financial Picture - Communications**

Preliminary figures indicate that the Communications area is under budget at year end. This is due to increased sales of merchandise and most particularly, the Dental Information System materials which have resulted in a greater margin between revenues and program expenses. The overall management of the Journal and its conversion to in-house production also has significantly added to the success of the bottom line.

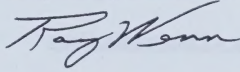
17. **Closing**

Both the Membership Committee and Steering Committee's predominant activities have been to centralize and consolidate membership services activities, introduce new membership incentives, and establish an efficient and effective program of communication, recruitment and retention of members in both the mandatory and voluntary provinces alike. We have been challenged in these endeavours by the recession, a decline in support by voluntary members and budget restrictions.

Nevertheless, progress has been made in expanding our products and programs to members, consolidating membership activities under our new Membership Services Manager, Carol Anne St. Laurent, strengthening our annual recruitment campaign, establishing guidelines and a protocol on access of services by non-members, addressing the relationship between the Membership Committee and CDAnet value added, and supporting Executive Council's initiative in establishing a working group to address membership concerns. All of this has been done with fewer dollars, better internal management and increased outside support.

The accomplishments of the past year are a direct result of the hard work and efforts of a dedicated team of Committee members and staff. I extend my sincere appreciation to all members of the Membership and Steering Committees and to Linda Teteruck, Carol Anne St. Laurent, Ralph Crawford and Joel Neal and their staff for all their efforts in a difficult, yet challenging year.

Respectfully Submitted,



Ray Wenn, D.D.S.

Chairman

Communications Steering Committee

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Communications Steering Committee.

COMMITTEE ON COMMUNITY & INSTITUTIONAL DENTISTRY

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members:	Dr. Wayne Steggles, Chairman, Smith Falls Dr. David Chimilar, Winnipeg Mr. Alf Dolan, Toronto Dr. Neil Farrell, London Dr. John Hardie, Vancouver Dr. Trey Petty, Calgary Dr. Geoff Smith, St. John's Ms. Jackie Smorang, Calgary Dr. Julian Tsafaroff, DVA, Toronto (Observer)
Executive Liaison:	Dr. Toby Gushue, St. John's
Senior Staff:	Mr. Brian Henderson, Director, Professional Services
Coordinator:	Mrs. Danuta Askew

1. Committee Meetings

The Committee on Community and Institutional Dentistry has met once since its report to the 1992 Annual Meeting of the CDA Board of Governors. The meeting was held in Ottawa on January 8-9, 1993.

ITEMS REQUIRING BOARD ACTION

2. Issues related to Infection Control and CDA Manual

The Committee reviewed a number of issues related to infection control in conjunction with its review of a draft CDA logbook/manual prepared by Dr. Trey Petty. A recent study on dental handpieces by Dr. David Lewis, entitled Cross-Contamination Potential for Dental Handpieces and Prophylaxis Angles was discussed and compared with an earlier scientific study on dental handpieces carried out by S. Mills and colleagues. This study, entitled "Microbial Contamination of High-Speed Handpiece Turbines" also examined potential for transmission of infection, and found no difference in potential between instruments subjected to sterilization and instruments subjected to high-level disinfection. Correspondence received by CDA on this topic was also reviewed. Concerns were identified with respect to research methodology employed in the recent Lewis study, and the Committee did not identify any grounds for revision of current CDA policies on infection control.

The committee also discussed a paper prepared by Dr. John Hardie, entitled "An Alternative Approach to Infection Control". It was felt that Dr. Hardie's analysis of the scientific justification for infection control techniques illustrated how regulatory agencies such as Occupational Safety and Health Administration (OSHA) in the United States were establishing requirements which might be questioned on the basis of scientific justification. The Committee was further reassured with respect to the continuing adequacy of current CDA policies on infection control by correspondence from Dr. J.A. Smith commenting on OSHA policies and correspondence between the Committee and the Community and Hospital Infection Control Association (CHICA). Dr. Smith is a member of CHICA and Head of the Division of Medical Microbiology at the Vancouver General Hospital.

Dr. Petty's draft Infection Control Manual was reviewed as a potential resource for clinicians in following CDA policy on infection control. The manual precisely follows the approved CDA policy, section by section and point by point, and provides space for recording details of how the dental practice carries out the policy. The Committee suggested a number of revisions and additions, which were accepted by Dr. Petty. The Infection Control Manual is presented for approval of the Board and if approved will be forwarded to the CDA Communications Department for editing/formatting for publication.

RESOLVED:

- 93.12 THAT the Infection Control Manual be approved
 by the Board of Governors as a CDA resource for
 clinicians.**

Executive Council approves the document in principle, and defers comment and approval of the document pending comments from the corporate bodies and licensing authorities.

WITHDRAWN

The Committee on Community and Institutional Dentistry believes that the Infection Control Manual is a resource which will be of interest and value to CDA members.

RESOLVED:

- 93.13 That the Infection Control Manual be distributed to CDA members as a membership benefit.

Executive Council agrees, subject to budgetary considerations.

WITHDRAWN

The Board of Governors defers its decision until presentation of the Manual at the 1993 Annual Meeting of the Board of Governors.

3. **CDA Policies on Fluorides**

As directed by the Board, the Committee reviewed existing CDA policies on fluorides in the context of recommendations presented by the April 1992 national workshop on fluorides chaired by Dr. Chris Clark of the University of British Columbia. There are two existing policies, one on Fluoridation of Water Supplies and one on Fluoride Supplementation. Detailed discussion led to two recommendations.

APPENDIX I

RESOLVED:

- 93.14 That the Canadian Dental Association reaffirms its support for fluoridation of municipal water supplies as a safe, economical and effective means of preventing dental caries in all age groups. Fluoride levels in community water supplies should be monitored and adjusted to ensure consistency in concentrations and avoid fluctuations.

ADOPTED

RESOLVED:

- 93.15 That the chart for fluoride supplement dosages be revised to reflect the deletion of the words "or 3 years".

ADOPTED**RESOLVED:**

- 93.16 That the existing CDA policy on Fluoride Supplementation be replaced with the revision presented in Appendix I as amended.

ADOPTED**ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION****4. Resources on Denture Labelling**

Selected national associations connected directly or indirectly with the field of long term care were sent copies of recommendations on labelling of removable appliances approved at the April 1992 Interim Meeting of the Board of Governors. The recommendations encouraged intermediate and long-term care facilities to label removable denture appliances upon patient admission. The recommendations were well received and several requests have been received for practical guidance on methods of denture labelling. Individual requests have been dealt with, but staff has been requested to arrange for a package of resource material to be mailed to those receiving the recommendations. The package will include a copy of a September 1992 CDA Journal article on Denture Identification and a brief description of basic procedures presented in a "how to" fashion.

5. Studies Linking Nitrous Oxide and Reduced Fertility

The Committee reviewed a study entitled "Reduced Fertility Among Women Employed as Dental Assistants Exposed to High Levels of Nitrous Oxide" by Rowland and colleagues and did not identify a need for further action. Scavenging techniques which represent the norm in dentistry within Canada are noted to be sufficient to preclude the effects identified.

6. **Tooth Whiteners**

CDA has previously expressed a concern that there are no longitudinal studies verifying the safety of tooth whiteners employing high concentrations of peroxides. Concern was expressed to Health and Welfare about such products being classified as cosmetics rather than drugs, but no change in policy resulted. A recent legal decision in the United States has forced the FDA to allow Den-Mat's Rembrandt Lighten Bleaching Gel to be marketed as a cosmetic rather than as a drug.

7. **Teaching Conference on Hospital Dentistry**

Dr. John Hardie presented information on planning for the 1993 CFDE/CDA Teaching Conference to be held next Fall in Toronto. The conference, on the subject of Hospital Dentistry, will be of particular interest to members of the Committee on Hospital & Institutional Dentistry. The possibility of holding the next meeting of the Committee in conjunction with the conference is being explored.

8. **Supervision of Dental Hygienists**

The Committee reviewed the President's letter on this subject with position papers by CDHA and CDA, noting points of difference and discussing possible means of bridging differences. No response had been received from CDHA at the time of the meeting and it was felt to be inappropriate to draw any conclusions at this time.

9. **Summary**

In conclusion, I would like to express appreciation to my committee members for the courtesy and cooperation extended to me as the new Committee chairman, and to Brian Henderson and Danuta Askew for their assistance to me and the Committee.

Respectfully submitted,

Wayne Steggle, D.D.S., Chairman
Committee on Community & Institutional Dentistry

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Committee on Community and Institutional Dentistry.

CANADIAN DENTAL ASSOCIATION POLICY ON FLUORIDE SUPPLEMENTATION

The Canadian Dental Association continues to support the use of fluorides in the prevention of dental caries as one of the most successful preventive health measures in the history of health care. The availability of fluorides from a variety of sources, however, is a current reality which the practising dentist needs to take into account in dealing with patients. This is particularly true of children under the age of six, where exposure to more fluoride than is required simply to prevent dental caries can cause dental fluorosis. There is no evidence of any health problems being created by such exposure, but it is prudent to attempt to limit exposure to the optimal levels required for continuing protection. Current levels of fluoride intake from all sources are difficult to establish for any given area, but the dentist should consider general intake to the extent possible in recommending fluoride supplementation. The following general guidelines are consistent with these principles:

1. Fluoride supplementation may be recommended only for individuals or groups at high risk to dental caries where the estimation of the mean fluoride ingested from all sources indicates a need.
2. The estimation of the mean fluoride ingestion from all sources should include all home and child care water sources and the possible impact of fluoride reducing factors such as the use of water filtration devices within the home.
3. Fluoride supplementation dosages for individuals or groups at high risk to dental caries is based on the age of the individual and the fluoride level of their water supply.
4. Chewable tablets or lozenges are the preferred forms of fluoride supplementation. Drops may be required for special care patients.

FLUORIDE SUPPLEMENT DOSAGES FOR INDIVIDUALS OR GROUPS AT HIGH RISK TO DENTAL CARRIES BASED ON FLUORIDE LEVEL IN WATER SUPPLY

AGE OF CHILD	DOSAGE OF DAILY SUPPLEMENT	
	Fluoride in water supply <0.3 ppm (mgpL)	Fluoride in water supply ≥0.3 ppm (mgpL)
< 3 years	not recommended	not recommended
3,4,5 years	0.25 mg (0.5 mg if no regular use of fluoridated toothpaste)	not recommended
6-13 years	1.0 mg	not recommended

Approved by the Board of Governors
Canadian Dental Association - May, 1993

COMMITTEE ON CONSUMER PRODUCTS RECOGNITION

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members:	Dr. Michael Eggert, Chairman, Edmonton Dr. Brad Chapple, Port Hope Dr. Edward C.S. Chan, Montreal Dr. Hardy Limeback, Toronto Dr. Hurinder S. Sandhu, London Dr. Daniel Haas, Toronto
Executive Liaison:	Dr. John Diggins, Vancouver
Observer:	Dr. Mona Akoury, Health & Welfare Canada
Senior Staff:	Mr. Brian Henderson, Director, Professional Services
Coordinator:	Mrs. Christiane Dowsing

1. Committee Meeting

The Committee on Consumer Products Recognition has held one meeting since the 1992 Annual Meeting of the CDA Board of Governors; the meeting was held on October 16, 1992.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

2. Trident Gum Submission

The committee reviewed a submission from Warner-Lambert to have Trident Sugarless Gum recognized under the chewing gum recognition program. The application was reviewed and approved at the October 16th meeting of the committee. To qualify for recognition under the policy approved by the CDA Board, a chewing gum must demonstrate that it does not contribute to dental caries. It must also be in possession of a valid DIN or GP number issued by the Health Protection Branch. This ensures that appropriate laboratory or clinical studies have been submitted to HPB.

Having met these criteria, Trident Cinnamon Gum with DIN # 0072838 was granted approval for use of the CDA Seal and Statement. The committee also agreed to review data on nine other flavour variations of the same product. These flavour variations will be approved provided the flavouring elements do not introduce complications to be taken into account in the determination that the product variation does not contribute to dental caries.

3. **Liaison Structure**

The Committee discussed how CDA committees interact on issues of common interest and a request was made that board reports of the CID and DMD committees be included as resources in future meetings of the CPR committee. This will allow the CPR committee to be updated on a regular basis on issues of common interest and to assist the development of consistent positions. A suggestion that a member of the CPR committee sit on one or both of these committees was dismissed because it was felt that this would burden the committee member with a heavy workload. Receiving board reports should suffice as this is a simple way to obtain more information on the deliberations of other committees. A proposal to form a two tier liaison structure became an item of new business and the Executive Liaison was asked to bring a suggestion to Executive Council that an ad hoc liaison team consisting of several members of different committees might be formed to help CDA deal with specific areas requiring attention. An example of this was the recent fluoride workshop, which anticipated the upcoming fluoride concerns and put together a working group. The committee also agreed that other committees should have access to the CPR committee board reports and agendas.

4. **Fluoride Guidelines**

In view of recent articles suggesting a link between fluoride and hip fractures in the elderly, the committee felt that anti-fluoridationists could use this data as ammunition to stop the fluoridation of water supplies. A MarketPlace television program is also planning to air a program on fluoride. The committee will endeavour to obtain further information on the subject of fluoride and keep up to date on further developments in this area. The committee recognizes a general responsibility to be aware and to investigate the biological issues with respect to fluoride and dentistry.

5. **Gold/Silver Seal of Recognition**

In view of a Health Protection Branch "Revised Standard Product Monograph" draft proposal to accept the ADA Seal of Recognition on dental products, the committee feels that the CDA Gold/Silver Seal of Recognition should be implemented as soon as possible.

6. **Report of Meeting with Health & Welfare**

Members were presented with HPB's draft of a Revised Standard Product Monograph which illustrates the bureau's intention to accept the ADA logo and statement concerning anti-carries preparations. This proposal was explained as being part of ongoing harmonization discussions between the Bureau of Non-Prescription Drugs in Canada and the Food and Drug Administration in the USA. The committee agreed that immediate action is needed to inform HPB of the distinct difference between the CDA Recognition Program and the ADA program.

7. **Advertising Guidelines**

In light of recurring problems with companies not following CDA Advertising Guidelines, the Committee members reviewed proposed changes to the reference to the profession in the advertising guidelines. The changes would allow for actors to portray dentists, hygienists, physicians or any other health care worker.

8. **Review of Contract**

The Committee had directed Mr. Henderson to review and draft an appropriate contract to incorporate chewing gum. A first draft was presented, and the committee was asked for advice in terms of fee schedules and advertising clauses. The draft contract was accepted in principle with fee schedules and advertising clauses to be further reviewed.

9. **Tooth Whiteners**

Committee members recently met with Mrs. Carman Kasperek of the Health Protection Branch and discussed the issue of tooth whiteners. The committee learned that Health and Welfare is not prepared to accept CDA's concern of the effects of tooth whiteners on tissue structure. The chairman suggested that the committee provide scientific evidence of the effect of tooth whiteners on tissue structure. The committee will respond to Mrs. Kasperek and follow up at future meetings.

10. **Revenue**

New initiatives such as chewing gum recognition will create the potential for increased revenue without violating the recognition program's fundamental commitment to public service.

11. **CPR Database**

The CPR Database is being reviewed on a continual basis as there is a need to review contracts and fees on an ongoing basis.

The CPR Committee wishes to thank Mr. Brian Henderson, Director, Professional Services and Mrs. Christiane Dowsing, committee coordinator for their assistance during the past year.

Respectfully submitted,

F. Michael Eggert, D.D.S., MRCD(C), M.Sc., Ph.D.
Chairman, Committee on Consumer Products Recognition

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Committee on Consumer Products Recognition as information.

CONVENTION COMMITTEE

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

General Chairman: Dr. Michel Jahjah

Executive Liaison: Mr. Jardine Neilson

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1993 CDA ANNUAL DENTAL MEETING - TORONTO

The 1993 Canadian Dental Association Annual Dental Meeting will be hosted by the Ontario Dental Association and held in Toronto, Ontario April 28 - May 1, 1993. The program will consist of one day of limited attendance, hands-on courses (Wednesday, April 28th) followed by three days of scientific sessions during the convention proper. Exhibits will be open on Thursday, April 29th from 9 am - 5 pm, on Friday, April 30th from 9 am - 5:30 pm and on Saturday, May 1st from 9 am - 1 pm.

The exhibit hall will be at the Metro Toronto Convention Centre. Lectures will be held at the Metro Toronto Convention Centre and L'Hotel. More than 320 booth spaces, representing 180 different dental suppliers and/or groups have been confirmed to date.

1. 1993 Convention Hotels

The following hotels have room blocks for convention delegates participating in the 1993 CDA Annual Dental Meeting:

L'Hotel (Headquarters)	\$140/night + taxes
Royal York Hotel (Headquarters)	\$125/night + taxes
SkyDome	\$125/night + taxes
Holiday Inn on King	\$99/night + taxes

The headquarter hotels will be L'Hotel and the Royal York Hotel.

2. Exhibits

We have confirmed to date, the allocation of 320 booths and are still responding to inquiries. We expect this meeting will feature the biggest dental exhibit ever held at a Canadian dental meeting. In addition to booths, there will be some table displays for specialty sections on the Exhibit Floor. We will also have an area of the Exhibit Hall sectioned off to house the Table clinics - more than 30 clinicians have been confirmed to deliver table clinic presentations that are scheduled for Thursday afternoon, and Friday morning and afternoon.

3. Canadian Dental Assistants' Association

The CDAA is once again participating under the same terms and conditions as set in previous years. Jeffrey Miller is representing the interests of CDAA on the 1993 Convention Committee.

4. Canadian Dental Hygienists' Association

Participation by CDHA at the 1993 CDA Annual Dental Meeting has been confirmed under the same terms and conditions as set in previous years. Lorraine Boomhour is the CDHA representative on the 1993 Convention Committee.

5. Ontario Dental Nurses and Assistants Association

The ODN&AA are also participating in the CDA Annual Dental Meeting. Jeff Miller and Pat Sampson Miller are representing the ODN & AA's interests on the 1993 committee. The ODN & AA has also agreed to contribute \$7,500 to the "Fun Night".

6. Ontario Dental Hygienists Association

Participation by the ODHA has also been confirmed for the 1993 CDA Annual Dental Meeting. Lorraine Boomhour is representing ODHA's interests on the committee. I would also like to acknowledge the great effort the ODHA is making to promote the meeting to its members under the direction of Jeannie Orchard.

7. Convention Registration

The convention is, once again, being offered as a membership benefit. Pre-registration deadline is March 5, 1993. Dentists who are members of either the Canadian Dental Association or the Ontario Dental Association will be offered free registration to the convention proper providing they pre-register before March 5th. Non-member dentists will pay a fee of \$155.00 this year.

8. Scientific Program

The 1993 Scientific Program is one of the biggest ever. Four limited attendance sessions are being offered on Wednesday, April 28th. These courses will be held at L'Hotel.

The Convention Proper features more than 55 clinicians. Most sessions are 2.5 hours in duration, however some are slightly shorter in length. In addition to the half-day sessions, a large number of mini-clinics will be delivered on Thursday and Friday.

This year's Scientific Chairman, Dr. Dick Ito, has developed an extensive mini-clinic program with more than 40 participants.

9. Convention Committee

The 1993 Convention Committee members are as follows:

Dr. Michel Jahjah, General Chairman, CDA Conventions
 Dr. Dick Ito, Chairperson, Scientific
 Dr. David Brown, Chairperson, Exhibits
 Dr. Barry Chapnick, Representative, Toronto Academy of Dentistry
 Dr. Warren Hing, Representative, West Toronto Dental Society
 Dr. Rob Sutherland, Representative, East Toronto Dental Society
 Dr. Eva Saxell, Representative, Toronto Central Dental Society
 Dr. Phil Novack, Representative, North Toronto Dental Society
 Dr. Ted Harper, Chairperson, Table Clinics
 Dr. Rebecca Yacobi, Chairperson, Social Program
 Mrs. Pat Miller Sampson ODN & AA Representative
 Mr. Jeffrey Miller, CDAA/ODN & AA Representative
 Ms. Lorraine Boomhour, CDHA/ODHA Representative
 Ms. Eva Young, DIAC Representative
 Mr. Ken Croney, DIAC Representative
 Mrs. Babs Harper, Spouses & Childrens' Program
 Ms. Debbie Fisher, Spouses & Childrens' Program
 Dr. Alan Vinegar, Fun Run
 Ms. Janice Edgar, CDA Convention Coordinator
 Ms. Diana Thorneycroft, ODA Meetings Coordinator
 Ms. Beverly Davies, ODA Meetings Support
 Dr. Elizabeth MacSween, ODA Liaison

10. Details Regarding 1993 Interim Board Meeting

The 1993 Interim Board Meeting will be held in Rooms 104 B/C/D at the Metro Toronto Convention Centre on Saturday, May 1st. The luncheon will be held in Room 104A.

Members of the Executive Council and Board of Governors will be housed at the L'Hotel and the Royal York Hotel.

11. ICD Participation

The International College of Dentists will be holding its activities at the Royal York Hotel. ICD Convention delegates requiring hotel accommodations have been requested to complete the regular Hotel Reservation form utilized by Convention delegates and forward to the CDA Convention Housing Bureau by March 5, 1993.

12. RCDC

The Royal College of Dentists of Canada will **not** be holding its functions during the Annual Dental Meeting this year as the scheduling of this year's meetings was too early for its needs.

13. Canadian Association of Paediatric Dentistry

The Canadian Association of Paediatric Dentistry have agreed to co-sponsor two half-day presentations to be delivered by Dr. Jack Dale on the topic of paediatric dentistry.

14. Convention Promotion

As usual we are using the CDA Journal to promote the CDA Annual Dental Meeting. In addition, the editors of provincial newsletters and newsletters prepared by various Specialty Sections have been very helpful in supporting and promoting our meeting in their publications. CDA Conventions appreciates all the support it is receiving.

Dr. Michel Jahjah and Janice Edgar attended the Winter Clinic in Toronto in November 1992 and distributed a 12-page summary of the upcoming meeting. It was very well received and generated a great deal of interest from both exhibitors and delegates.

15. Social Functions

The Opening Ceremony will be held at the Metro Toronto Convention Centre on Thursday, April 29 from 5 pm - 7 pm. The program is being sponsored by Ash Temple and will include a performance by Toronto's Famous People Players, The Children's Opera and a Caribanna Dance Troupe.

The opening ceremony will be followed by a Fun Night featuring Toronto's "La Cage". This event is a ticketed item and tickets are \$20 each, a light meal will be served. Following the La Cage show a dance will be held in one of the rooms upstairs at the MTCC, admission to the dance is free for all registered delegates, entertainment to be provided by Party Lights.

The traditional President's Gala will be held on Friday, April 30th at L'Hotel. The theme is "A Cavalcade of Cultures" and a buffet meal will be served. Live entertainment. Tickets are \$75 per person.

CDA received a financial contribution from the Ontario Dental Association for an evening function, scheduled for Wednesday, April 28th; admission by invitation only. The ODA was fully responsible for all aspects of this event.

16. Sponsorship - 1993 CDA Annual Dental Meeting

Several groups, organizations and suppliers have agreed to sponsor events and activities this year during the CDA Annual Dental Meeting. Listed below is a summary of this year's sponsors:

Ash Temple	Opening ceremony/program book advertisement
Aurum Ceramic/Classic	Delegate kits/jeep for exhibit draw/ program book ad/Thomas Olson lecture
Bell Canada	courtesy phones in Exhibit hall/ seats for Jays game at SkyDome for pre- registration draw
Butler	program book advertisement
Caulk Canada	Dr Ross Nash presentation/program book ad
CDSPI	note pads/Harris-LaMantia-Gallant lecture
Exan	computer equipment/message centre/Devries lecture
Healthco	program book ad/Fun Night/Walter Hailey lecture
Healthgroup Financial	fun run
Henry's Camera	photography contest
H-Wave Canada	Dr Stanley Malamed presentation
Kerr Canada	Dr Donald Yu hands-on presentation
LeValliant & Associates	Lunch - Friday, April 30/financial presentation
Nobelpharma	Dr Torsten Jemt hands-on course
Procter & Gamble	Dr Christopher Clark lectures
Wright Dental	Dr Karl Leinfelder presentation

Canadian Academy of Oral Medicine	Dr. Tom Daley & Dr. Gillian
University of Western Ontario	McCarthy lectures

Canadian Association of Orthodontists	Dr. Eugene Roberts lecture
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Canadian Association of Paediatric Dentists	Dr. Jack Dale lecture
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Canadian Fund for Dental Education	Fiona McCall/Paul Howard
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ODA Dentists at Risk Committee	Dr. Chris Christianson
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Toronto Hospital for Sick Children	Drs. Judd, Johnston, Kenny, Yacobi
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Ontario Dental Nurses & Asst. Assn.	Fun Night
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University of Toronto	full day periodontal symposium
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1993 OUT-OF COUNTRY SEMINAR PROGRAM

CDA Conventions has developed an out-of-country seminar program that is open to all members. A brochure detailing the four programs for 1993 was forwarded to all members in mailing sent at the end of January. This years program includes the following destinations:

Kenya
Turkey & FDI '93 Göteborg
India/Nepal
South Africa

June 9 - June 24
August 29 - September 13
October 7 - October 23
November 25 - December 10

1994 FDI CONGRESS UPDATE

An update will be forwarded following the meeting between FDI and CDA officials taking place in Chicago this February.

Respectfully submitted,

Michel Jahjah, D.D.S.
General Chairman
CDA Conventions

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Convention Committee as information.

COMMITTEE ON DENTAL MATERIALS AND DEVICES

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members:	Dr. Ralph Y Barolet, Montréal, Chairman (1991-92) Dr. Pierre Desautels, Montréal Dr. Leonard Johnson, London Dr. Derek W. Jones, Halifax (Chairman, since 1992 Annual Meeting) Dr. Peter Williams, Winnipeg Dr. Richard Roydhouse, Vancouver Dr. Dennis Smith, Toronto
Executive	Dr. Barry Dolman, Montréal (1991-92)
Liaison:	Dr. Bernie White, Saskatoon (1992-93)
Observers:	Dr. Attar Chawla, HPB, Health & Welfare, Ottawa Ms. Linda Leinan, ISTC, Ottawa Mr. George Osterbauer, DIAC, Toronto
Senior Staff:	Mr. Brian Henderson, Director, Professional Services Dr. Arthur Schwartz, Associate Director, Professional Services
Coordinator:	Mrs. Christiane Dowsing

1. Committee Meetings

The Committee has held one meeting since its report to the 1991 Interim Meeting of the CDA Board of Governors; the meeting was held on June 12, 1992.

ITEMS REQUIRING BOARD ACTION

2. Toothbrush Statement Program

The Committee reviewed the current status of The Toothbrush Statement Program and found that manufacturers were reluctant to participate in a program that does not allow the use of the CDA Seal on packaging and does not permit advertising. Manufacturers regard both the Seal and the Statement as important advantages in marketing these products.

The Committee believes it is appropriate to revise the existing contract to include mechanical toothbrushes. The criteria for recognition will be based on demonstration of compliance with the ISO standard.

The Committee agreed that the CDA contract should be adapted to allow the Seal and Statement to appear on the packaging provided that evidence of compliance with the ISO standard or a draft thereof is submitted.

RESOLVED:

- 93.17 **THAT the CDA Toothbrush Contract be adapted to include mechanical toothbrushes and allow the Seal and Statement to appear on the packaging provided that evidence of compliance with the ISO Standard or a draft thereof is submitted.**

ADOPTED

3. **Canadian Dental Research Foundation (CDRF) Report**

The Committee reviewed current guidelines for the CDRF Award and discussed ways of increasing the number of applicants. Several years ago, it was decided to make the award every two years to permit the award to be larger. Every two years, the committee on Dental Materials and Devices, has been inviting applications from dental students for a \$2,000 award in support of a student research project. Student interest is diminishing as the amount of the award is insufficient to support many projects currently being undertaken by students. It was suggested that the committee consider increasing the award to \$3,000 in order to attract more applicants. The capital allocation supporting the award is in excess of \$56,000. It is intended that the award will continue to be made every second year.

RESOLVED:

- 93.18 **THAT the CDRF award be increased from \$2,000 to \$3,000 as of 1995, subject to the availability of funds.**

ADOPTED

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

4. **Dental Industries Association of Canada (DIAC) Report**

The Committee was informed by DIAC that the level of dental business has seriously decreased due to non-authorized dealers and purchases being made through the U.S. The main concern is that U.S. products, which do not follow WHIMIS standards are

being sold illegally in Canada, through unauthorized dealers. The committee members agreed that the profession should be made aware of these practices. The committee also suggested that Health Protection Branch be informed and that stringent regulations should be in place to deal with this problem.

A letter was sent to Health Protection Branch under Mr. Neilson's signature to convey concern that dental products that have not met Health & Welfare requirements are increasingly being sold in Canada with potential consequences for Canadian Dental Manufacturers, the dental profession and dental patients. The letter encouraged the full use of existing mechanisms to control this situation. A response requesting further detail has been received, and a follow up letter is being prepared in consultation with George Osterbauer of DIAC.

5. **Guidelines for the safe handling of mercury in the dental office**

As directed by the Board, the Guidelines for the Safe Handling of Mercury in the Dental Office were circulated and comments were received and discussed. It was agreed, after some discussion, that the guidelines could be made more positive and should be forwarded for professional editing in order for the Guidelines to achieve the desired purpose.

6. **CDA Professional Recognition Program - Surgical Gloves**

The Committee discussed the new program and was informed that Ocean Pacific MedTec, a Vancouver based manufacturer, is the first company to be awarded the CDA Seal of Recognition for surgical gloves. Several manufacturers have expressed interest in participating in the CDA Glove Recognition Program. The committee also reviewed the criteria for recognition (which is Canadian General Standards Board certification).

7. **Tooth Whiteners**

The committee reviewed studies on this topic and agreed that there were no longitudinal studies supporting the safe use of these products. The committee discussed the FDA ruling which changed the classification for these products from cosmetics to drugs in the U.S.A. The committee was surprised to learn that Canada was still fighting to have tooth whiteners reclassified, since the CDA has taken a formal position on tooth whiteners and related its position to scientific considerations. The committee was informed that representatives of the Consumer Product Recognition committee would be meeting with Health Protection Branch to discuss issues directly related to tooth whiteners. The Dental Materials and Devices committee expressed approval of this initiative.

8. **New Product Submission - Metasys**

The committee reviewed correspondence received from Metasys requesting CDA recognition for their waste filtering system. It was reported that an ISO standard is being developed for this type of product. The committee agreed that once an ISO standard is developed, the committee will be able to consider the Metasys system for CDA recognition. The company is being advised of this development.

9. **Topical Fluorides for Prevention**

A member of the committee proposed that recognition should be awarded to topical fluorides since, due partly to an aging population, tooth sensitivity is seen as an increasing problem in dental practices. The committee was informed that root caries and sensitivity problems are usually successfully treated with topical fluorides. The committee deferred a decision on this issue until the next DMD meeting, to permit fuller discussion of the issue.

10. **Appreciation**

I would like to express my appreciation to the members of the Committee, the representatives from DIAC and the Department of Industry, Science and Technology, the observers from Health & Welfare and the staff for their cooperation and effort involved in maintaining programs operated under the Committee's authority and for productive discussion, at each meeting, of issues of current concern.

I also wish to thank Brian Henderson, Director of Professional Services, and Christiane Dowsing, Committee Coordinator, for their efforts during the past year on behalf of the Committee.

Respectfully submitted,

Ralph Y. Barolet, D.D.S.
Chairman
Committee on Dental Materials and Devices

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Committee on Dental Materials and Devices.

GOVERNMENT RELATIONS COMMITTEE

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Bryun Sigfstead, Chairman, Edmonton
Dr. Elizabeth MacSween, Ottawa

Senior Staff: Mr. Jardine Neilson, Executive Director
Ms. Sandra Deziel, Manager, Executive Services

1. Committee Meetings and Activities

The Committee has not met since its last report to the 1992 Annual Board of Governors meeting.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

2. Canadian Coalition on Organ Donor Awareness (CCODA)

In preparation for the 1993 Organ Donor Awareness Week the Canadian Coalition on Organ Donor Awareness (CCODA) plans a national survey on attitudes toward organ donation. Press releases will be developed from the findings in the survey and utilized in the 1993 campaign.

There is not a Canadian survey of this kind and it is believed that the results will be useful in developing a long term national strategic plan. The CDA continues to participate in CCODA and is represented at its meetings.

3. Health and Welfare Family Violence Initiative

The CDA was invited to participate in the Health and Welfare Family Violence Initiative Meeting in November 1992. Dr. Elizabeth MacSween attended the meeting as CDA's representative.

Dr. MacSween reports that the group's mandate is to raise awareness and educate dental health care professionals in the detection and intervention of suspected cases of familial abuse.

Dental professionals have written rather extensively on this topic and the CDA has endorsed a study done by Dr. Douglas Galan, of the University of Manitoba on "Elder Abuse and the Dentist's Awareness and Knowledge of the Program", supported by the National Health, Research & Development Program, Health & Welfare. This study could prove to be the basis for a future CDA initiative.

4. **Canadian Council on Smoking and Health**

A recent study done by the World Health Organization, the American Cancer Society and the Imperial Cancer Research Fund in Britain estimated that by 1995, 21,000 Canadians between the ages of 35-69 will die annually from Tobacco use. Quoting these statistics CDA President, Dr. Les Allen wrote to Prime Minister Mulroney urging him to proceed without further delay with the implementation of the proposed health warnings pursuant to the Tobacco Products Control Act announced over two years ago.

5. **Health & Welfare Representative - 1994 FDI World Congress**

It has been proposed to Health and Welfare that Dr. Bill Bedford be named the Health and Welfare representative to the Chief Dental Officers meeting during the 1994 FDI World Congress. To date no response has been received concerning this matter.

6. **Employment and Immigration General Occupations List**

Correspondence was received from Employment and Immigration providing information on the General Occupation List for 1993 as it pertains to occupations in the oral health field. CDA responded with the recommendation that the Dental Hygiene rating be revised to reflect the current supply and demand situation. A copy of the response is attached.

APPENDIX I

7. **Federal/Provincial Dental Health Council**

Dr. Bernie White, Executive Council, was the CDA representative to the October 1992 Federal/Provincial Dental Health Council meeting.

CDA was asked to provide assistance by issuing statements of support and direction for provincial programs emphasizing to governments the importance of dental health on the total health picture and by assisting with lobby efforts against the erosion of dental personnel in dental programs.

CDA Management will review the report further and consider the suggestion that this is an opportunity to demonstrate CDA's influence and leadership at a time when governments are dealing with budget restraints. Specifically they may be receptive to low-budget dental health education programs that could utilize CDA "commercial" materials and expertise.

8. **Canadian Coalition on Medication Use and the Elderly**

As a member organization of the Canadian Coalition on Medication Use and the Elderly the CDA was approached to assist in the solicitation of financial support from Health and Welfare in order to sustain the Coalition Secretariat for a three year period ending March 1996.

In December CDA's Executive Director, wrote to The Honorable Benoit Bouchard, Minister of Health and Welfare Canada, to show support for the Coalition funding proposal.

9. **North American Free Trade Agreement (NAFTA)**

CDA has been in contact with a Chief Negotiator for Services of the office of the North American Free Trade Negotiations to discuss NAFTA's implications for Canadian dentists and dental practices.

NAFTA will not impinge on the authority of the national or provincial licensing bodies in Canada, as individuals entering Canada must apply to the appropriate licensing authorities regarding practice of a profession.

Requirements of citizenship or permanent residence are judged to be discriminatory requirements for professional licensure and certification. All parties to the agreement must eliminate such requirements by 1996. If any such requirements are found within current legislation relating to the practice of dentistry in Canada they must be eliminated by 1996.

Annex 1210 - of NAFTA - Development of Mutually Acceptable Professional Standards and Criteria provides a blue print for professions who have expressed an interest in the development of mutually acceptable professional standards and criteria. The commission will monitor and assist in progress towards stated goals/targets.

The decision to pursue this will come from the bottom up. In other words the licensing bodies of the professions would have to indicate an interest in pursuing this end. To date only one medically related group (physiotherapists in Quebec) has indicated any desire to do so.

The Negotiations office informed CDA that they acknowledge that the medical/dental professions in Canada and the U.S. currently have no interest especially given supply situations at present.

Respectfully submitted,

Bryun Sigfstead, D.D.S.
Chairman, Government Relations
Committee

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Government Relations Committee as information.



APPENDIX I

BY FACSIMILE 994-4533

December 10, 1992

Ms. Wendy Salmon, Analyst
Occupational Studies and
Program Linkage Unit
Employment and Immigration
140 Promenade du Portage
Place du Centre, Phase IV
Hull, Quebec
K1A 0J9

CANADIAN
DENTAL
ASSOCIATION
L'ASSOCIATION
DENTAIRE
CANADIENNE

Dear Wendy:

Thank you for providing the 1992 General List of Occupations and the draft background information on its policy, principles and methodology.

Dr. Donald MacFarlane, Chairman of the CDA Professional Resource Utilization Committee, has reviewed the list in conjunction with most current information and feedback available to us. There is evidence that the current economic climate is having a negative impact on employment opportunities in the dental field. CDA would therefore recommend that Dental Hygiene (3157-110) be given a point rating of 5 rather than 10.

Thank you for the opportunity to comment on the list. We look forward to continued communication with you on this topic.

Sincerely yours,

Sandra Deziel
Manager, Executive Services

c.c. Management Committee
Mr. Jardine Neilson, Executive Director
Dr. Donald MacFarlane, Chairman - PRUC
Dr. Wayne Steggle, Chairman, Committee on Community and
Institutional Dentistry

/sfb

MANAGEMENT COMMITTEE

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Bernard Dolansky, Ottawa - Chairman
Dr. Les Allen, Winnipeg
Dr. Bryun Sigfstead, Edmonton
Dr. Raymond Wenn, Charlottetown
Mr. Jardine Neilson, Executive Director

Senior Staff: Ms. Sandra Deziel, Manager - Executive Services

Coordinator: Mrs. Suzanne Burton

1. Committee Meetings

Since the 1992 Annual Meeting of the CDA Board of Governors, the Management Committee has met twice - October 29, 1992 and February 10, 1993. In addition, Management Committee met with the Management Committee of CDSPI on October 14, 1992 and January 27, 1993. Dr. Allen completed his term on Management Committee at the October/November Executive Council Meeting.

ITEMS REQUIRING BOARD ACTION

2. 1994 Fee Increases - 1994 Provisional Budget

Building on the very successful Mission Statement and goal setting work of 1991, the 1992 Planning Session extended the planning framework by developing and approving statements of association objectives, following a process of validating them against the CDA's Mission and Goals. The second phase of the Planning Session involved the discussion of specific proposals for adjustment to the 1993 budget. The adjustment proposals were based on an in-depth functional analysis of all programs/budget areas, including an assessment of cost-effectiveness. Executive Council examined proposals against the background of approved objectives, and gave direction to staff for further financial analysis of and adjustments to the 1993 budget.

Based on previously established priorities, re-confirmed through the objectives validation process, and direction received from Executive Council for further adjustment to the 1993 budget, a draft provisional 1994 budget was prepared and reviewed by Management Committee at its February meeting. The 1994 provisional budget presented for Board approval includes the fee increases outlined below. The recommendations for fee increases are made against the background of preliminary information on a proposed fee payment formula and its rationale through comparison

of services provided against revenue sources and a review of increases over the past years. This information has been referred to the Ad Hoc Committee on Membership Concerns for further examination and recommendation.

APPENDIX I

Notes to the revised 1993 budget are found in Appendix IV, and should be referenced with regard to significant adjustments which are reflected in the 1994 provisional budget. The 1994 provisional budget continues to focus on cost control essential to financial stability, which has been determined as an overriding priority for the Association, and recognizes several realities which have a significant effect on the 1994 budget. These include principal and interest payments on the financing arrangements, depreciation expense relative to the renovation of the CDA building, a realistically conservative projection of fee revenues, and an inflation factor.

Corporate Fee

RESOLVED:

- 93.19 THAT the Corporate Membership fee be raised to \$15.00, effective in 1994, an increase of \$3.00.

ADOPTED

Licensing Body Fee

RESOLVED:

- 93.20 THAT CDA consult with the licensing bodies in order that the Licensing Body fee be raised to \$22.00, effective 1994, an increase of \$2.00.

ADOPTED

Individual Membership Fees

RESOLVED:

- 93.21 THAT the active membership fee be raised to \$425.00, effective 1994, an increase of \$15.00; and
- THAT the other individual membership categories be adjusted proportionately.

ADOPTED

Information presented here for comparison purposes relative to 1992 actuals is in draft form. The 1992 audited financial statements will be presented for Governors' approval at the Annual Meeting.

RESOLVED:

- 93.22 **THAT** the appended provisional budget for 1994 be approved.

APPENDIX II**ADOPTED**

3. **Roles and Responsibilities of the Management Committee**

The roles and responsibilities of the Management Committee incorporate two distinct areas - that of the "Finance Committee", and that associated with the general duties of CDA's elective officers. When acting in the capacity of elective officers of the Association, Management members do so, as an Executive Committee of the Executive Council. Management Committee reviewed its roles and responsibilities as defined in the CDA Constitution and By-Laws.

APPENDIX III**RESOLVED:**

- 93.23 **THAT** the words "shall report" be replaced with the words "be accountable for", in the recommendation to amend the Roles and Responsibilities of Management Committee.

DEFEATED**RESOLVED:**

- 93.24 **THAT** the words "and be accountable for" be added after "shall report" in the following recommendation.

ADOPTED

RESOLVED:

93.25 **THAT the following be added to the Roles and Responsibilities of the Management Committee:**

Shall have the authority to act on behalf of the Executive Council between meetings of Council when necessary, and shall report and be accountable for all such actions at the next meeting of Executive Council.

ADOPTED**RESOLVED:**

92.26 **THAT the Council on Constitution and By-Laws be directed to prepare the necessary By-Law amendments.**

ADOPTED**ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION****4. 1993 Adjusted Budget**

The 1992 Planning Session directed staff to revise to the provisional 1993 budget. At the Planning Session, the Executive Council approved \$148,000 in expense reductions and added \$71,000 in new expenses. In addition, direction was given with regard to the following:

- re-calculation of the 1993 payroll cost based on fewer staff members;
- an estimate of legal fees for the QDSA Lawsuit;
- an estimate of membership revenue for 1993 based on somewhat disappointing results for 1992;
- an expected reduction in the grant from the Canadian Dental Foundation for Library operating expenses.

The need for a significant surplus was also indicated.

Subsequent to the Planning Session, Management worked with senior staff to pare expenses further and where possible find additional sources of revenue. All adjustments to the original budget which forecast a surplus of \$409.00 are summarized in the appended document. The revised projected surplus for 1993 is approximately \$40,000. While there are several factors which might assist in realizing a more significant surplus, Management believes that the revised 1993 budget is a reasonable and responsible projection.

APPENDIX IV**5. 1992 Adjusted Budget - Financial Statements**

At the 1992 Annual Meeting, information was provided to Governors based on CDA's financial statements for the period ending August 30, 1992. The expense budget had been increased by \$100,000 to reflect the projected expense relative to the legal proceeding to address the issues of the Executive Council's management of CDIP surpluses. Management also projected a short-fall in budgeted revenue from membership fees.

Given Management's commitment to achieve a surplus in 1992 and beyond, expenses for the remainder of the year were strictly managed and closely monitored with a view to achieving this goal. In addition, it had become obvious through the fiscal year that, due to falling interest rates, the interest income accruing to the CDF would not allow for the transfer of an amount to the CDA Library to cover its operating expenses based on projections. In September, the CDA wrote to the CDF and requested a stand-alone, one-time contribution from the capital appreciation portion of the Langstaff Fund in the amount of \$75,000. The request was approved and an amount of \$75,000 was transferred for Library operating purposes.

Non-dues revenue from various sources including DAT were higher than projected; the CDA Journal for the first time in a decade showed a net profit. Other decisions made at the 1992 Planning Session, including a program of staff attrition and the treatment of expenses incurred in 1992 towards promotion of FDI 1994 as pre-paid 1994 expenses, have had a significant impact on the projected year end position.

CDA draft financial statements for 1992 project a surplus of approximately \$120,000. Appended information highlights adjustments made to the 1992 budget and areas where there is a significant variance between budget and year end position.

APPENDIX V

It must be stressed that the information presented here for comparison purposes is in draft form. The 1992 audited statements will be presented for approval at the 1993 Annual Meeting.

6. CDAnet
Budget

The initial 1993 CDAnet budget request of approximately \$132,000 comprised funding of claims processing, value-added (CDAnet Plus) and Committee meetings. The 1993 provisional budget contained no provision to fund CDAnet operations as it was formulated on the principle that the revenue flow from claims processing would be sufficient to cover expenses. At the 1992 Planning Session, the Executive Council directed the CDAnet Committee to revise its budget request to include income projections through 1993 and beyond. Based on the projections provided by the Committee, a revised 1993 budget of \$80,000 has been approved, and is referenced on page 17 of Appendix IV.

Communication with DIAC

Information forthcoming from a DIAC meeting held in the Fall of 1992 indicated that it appeared that DIAC had been misinformed and not provided with up-to-date information regarding CDAnet. A written response was prepared to the concerns identified by DIAC and this communication resulted in an invitation for CDA to present information regarding CDAnet at a February 24 meeting.

CDAnet Staff Management Committee

In order to ensure cohesive staff management and appropriate information sharing on all aspects of CDAnet, a staff management committee has been formed. The focus of the Committee is on the coordination of membership, marketing, accounting and all other CDAnet activities.

Ongoing Discussions with the Western - Not for Profit Dental Plans

The Chairman of CDAnet Committee, Dr. Don MacFarlane continues to work closely with Management Committee with a goal of bringing the Western - Not for Profit Dental Plans - MSA/CU&C, Alberta Blue and Manitoba Blue into CDAnet. Management Committee appreciates the input received from the College of Dental Surgeons of B.C. on how this might be achieved for the "Not for Profits" in B.C. and is optimistic that an agreement can be reached. If further information is available at the time of the 1993 Interim Meeting, the CDAnet Chairman will provide an update.

7. CDA Building

Approximately four years ago, CDA analyzed scenarios for renting versus owning a building to house its headquarters operations. A decision was made at that time to endorse continued ownership of the Alta Vista Drive property, and resulted in

renovations to the CDA building. The rent versus own scenarios will be re-visited and a report prepared for a future meeting of Management Committee and Executive Council.

8. **Human Resource Management**

In support of the commitment to balance the 1993 budget, to make provisions for pay-back to the CDA mortgage and to ensure CDA's ongoing financial stability, staff and associated overhead costs have been examined. A program of attrition to reduce the staff complement is currently in effect. Vacancies and new positions will be filled from existing human resources. Exceptions may be authorized by the Executive Director, when deemed in the best interest of the Association.

9. **CDA Administrative Expense - CDIP/CDA RSP**

As identified in CDA By-Laws, Executive Council is Trustee for all insurance, retention, surplus and reserve funds. In addition, Executive Council members are Trustees for the CDIP Life and Disability Plans Trusts. In order to meet this responsibility, CDA incurs costs of communication with and direction to CDSPI. This is accomplished through regularly scheduled CDA/CDSPI Management meetings, and meetings of the Executive Council. From time to time, extraordinary meetings of Executive Council have been required.

The Executive Council must continue to play an active role in decision-taking elements of the administration of CDIP and the CDA RSP. This has an impact on CDA resources, both human and financial. CDSPI Management has indicated it will prepare a proposal for CDA Management to be presented at the next joint Management meeting. Speaking on behalf of CDSPI, Dr. Rod Moran stressed that the proposal would have to pass the scrutiny of the CDSPI Board.

10. **Management Meeting Between CDA and the American Dental Association**

A Management meeting between the CDA and ADA has been confirmed for March 12, 1993 in Ottawa. The ADA will be represented by Dr. Jack Harris, President, and Dr. James Gaines, President-Elect. Agenda items identified by CDA include: FDI 1994 Vancouver, the North American Free Trade Agreement (broad implications and discussion of the CDA Seal of Recognition Program), Protocol for ADA programs in Canada, Infection control and OSHA, Electronic data interchange, Hygiene relations, Mercury - Environmental Effects and Periodontal Screening - Procter & Gamble.

11. CDA/CDSPI Management Meeting

The January 27 meeting between CDA and CDSPI Management Committees was, for the most part, devoted to discussion of CDIP surpluses and the provision of information required at the February meeting of Executive Council, in order to make decisions on various matters arising from the judgment of Justice McKeown. Further information on this item is contained in the Executive Council report.

The following matters were also reviewed:

1992-93 Funding Grad Program

Funding for the Grad Program normally comes from CDIP surplus funds. CDSPI has paid \$132,000 to Prudential from the conversion fund, to finance the 1992 Grad Program. A similar amount will be required for the 1993 program.

CDA/CDSPI Cooperative Efforts

Staff of CDSPI and CDA met on January 26, to discuss the potential for cooperative efforts in several areas including marketing, computer systems, insurance coverage and membership records. Several initiatives examined are being pursued, and CDA and CDSPI Managements are confident that these will benefit both organizations.

Search for CDSPI Management Member

The Search Committee for the new member of CDSPI Management has been established. Members are Dr. Rod Moran, Dr. George Zwicker and Dr. Frank Copithorne. An advertisement will appear in the April edition of the CDA Journal.

12. Grieve Memorial Lectureship Agreement

As reported to Governors at the 1992 Annual Meeting, the Canadian Association of Orthodontists (CAO), and the CDA are reviewing current administrative arrangements between the two organizations, with regard to the Grieve Memorial Lecture, the intent is to formalize an agreement in this area. A draft proposal has been developed by Drs. Oleg Kopytov (CAO) and Bernard Dolansky (CDA); this proposal was presented to the CAO at its Annual Meeting in August, 1992. Dr. Michel Farmer, President of the CAO has indicated that a revised draft agreement will be reviewed at the CAO's March Board Meeting, and a response returned to CDA shortly thereafter.

13. **Amalgamation of Fund Administration - CDA Charities**

At the 1992 Annual Meeting, Governors were informed of a proposal to integrate CDA's fundraising efforts to maximize potential for supporting existing charities, and increase the funding of new significant causes. The Canadian Dental Foundation and the Canadian Fund for Dental Education support administrative amalgamation, and the Executive Council has directed CDF and CFDE to effect this change immediately. Administrative support of the Canadian Dental Foundation, the Canadian Fund for Dental Education, the Canadian Dental Research Foundation, the Library Trust Fund, and the Grieve Memorial Lectureship will be integrated, for reasons of economy and efficiency. The administrative arrangement was planned with CDF as the umbrella organization.

At its February meeting, Management Committee was made aware of a proposal forthcoming from CFDE with regard to a new identity for the umbrella organization - Dentistry Canada Fund. Management Committee will review this request and provide Governors with further information, if a change in direction is anticipated with regard to the name of the umbrella organization.

14. **Amendments - CDA Expense Policy**

The Executive Council has approved a recommendation from the Management Committee for amendments to the CDA expense policy. The revised policy is appended for Governors' information; changes are indicated in bold print.

APPENDIX VI

15. **CDA Nominations to the Council on Education and the Commission on Dental Accreditation of Canada**

CDA representatives to the Council on Education and the Commission on Dental Accreditation of Canada will complete their first terms at the 1993 Annual Meeting, and nominations are required to confirm re-nomination/appointment. Dr. Joel Epstein has been nominated to continue as the CDA's hospital representative to the Council on Education. Dr. Kevin Roach has been appointed to continue as CDA's representative to the Commission on Dental Accreditation of Canada. Dr. David Murphy has been appointed to continue as the CDA's hospital/institutional dentistry representative to the Commission on Dental Accreditation of Canada.

16. **CDA Awards/Dentsply Students Clinicians' Luncheon**

Dentsply has accepted CDA's invitation to participate in and support the CDA Awards/Dentsply Clinicians' Luncheon, to be held on Friday, September 10, in conjunction with the 1993 Annual Meeting of the CDA Board of Governors. The timing of CDA's Annual Dental Meeting in April-May in Toronto precluded the normal scheduling of the Students Clinicians' Program and the Dentsply Dinner normally held in honour of the student clinician winners.

The table clinics and judging will be held on Friday, September 10, followed by the CDA Awards/Dentsply Clinicians' Luncheon, where the winners will be announced.

The open forum for the clinics will be held from 11:30 to 12:30 on Saturday, September 11, 1993. Executive Council is confident that Governors and others in attendance at the Annual Meeting will take this opportunity to view the clinics, and offer personal congratulations to participants. Dentsply International has graciously provided a grant in the amount of \$5,000 to help defray the costs of the Luncheon.

17. **Out of Province Health Care Costs**

CDSPI has provided CDA with information concerning out of province health care costs, and the advisability of providing coverage for both CDA and its volunteers, when travelling outside of their province of residence.

This matter will be reviewed by staff, and a recommendation presented to Management at its next meeting.

18. **Pro-Rated Membership**

Management Committee has approved pro-rated membership for those applying for membership from the voluntary provinces. A member who joins the Association on July 1, or later in a given year, will be entitled to a pro-rated membership fee. A minimum three months' fee, (one quarter year payment) must be remitted, along with membership dues for the next membership year.

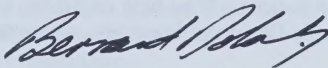
19. **Funding Request - Dalhousie University**

CDA had provided support for a study on the use of amalgam, through a CFDE grant of \$10,000 to Dalhousie University. The funding was contingent upon receipt of a grant from NHRDP. Unfortunately, the grant was not awarded. CDA continues to support study on the use of amalgam, the development of scientific data, and literature review. Management approved CDA support of the request of Dalhousie University to the CFDE, for funding to continue activities related to the use of dental amalgams.

20. Cheque Registers - Chairman's Audit

The Executive Director of the Association reviews monthly cheque registers, detailing disbursements of the CDA. The President-Elect conducts audits of CDA disbursements on a random basis from time to time. The most recent audits included the areas of Executive Council and Management Committee. Cheque registers to December 31, 1992 have been reviewed and a report provided to Management Committee.

Respectfully submitted,



Bernard Dolansky, B.A., D.D.S., M.S.
Chairman, Management Committee

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Management Committee.

Proposed Fee Payment Formula

	Governance	Professional	Member	Total
Direct Expenses	\$545,500	\$340,800	\$1,508,000	\$2,387,100
Admin. Costs	549,800	694,500	1,649,400	2,893,700
Sub-Total	\$1,095,300	\$1,035,300	\$3,157,400	\$5,288,000
Less: Non Dues Income	0	416,600	1,196,100	1,612,700
Total	\$1,095,300	\$618,700	\$1,961,300	\$3,675,300
Members	10,715	14,317	8,677	
Membership Fee	\$102	\$43	\$226	\$371
Current Fee	\$12	\$20	\$410	\$442

Note:

Based on 1992 Membership Fee rates and draft financial statements.

CDA Membership Fees

Year	CDA Active Membership Fee	CDA Corporate Fee	CDA Licensing Body Grant	Total
1974	65	0	0	65
1975	65	0	2	67
1976	90	8	2	100
1977	90	8	2	100
1978	90	8	5	103
1979	90	8	5	103
1980	125	8	5	138
1981	200	8	5	213
1982	200	8	5	213
1983	200	8	5	213
1984	225	8	5	238
1985	225	8	5	238
1986	235	8	5	248
1987	260	10	10	280
1988	290	10	10	310
1989	300	10	10	320
1990	330	10	20	360
1991	365	10	20	395
1992	395	12	20	427
1993	410	12	20	442
1994	425	15	22	462

Year	Active	Affiliate	Supporting	Retired	Student
1974	65	0	25	0	5
1975	65	55	25	0	5
1976	90	90	35	0	5
1977	90	90	35	0	5
1978	90	90	35	0	5
1979	90	90	35	0	5
1980	125	125	50	0	10
1981	200	200	50	0	10
1982	200	200	50	0	10
1983	200	200	50	0	10
1984	225	225	56	0	14
1985	225	225	56	0	14
1986	235	235	58	0	14
1987	260	260	130	0	16
1988	290	290	145	0	17
1989	300	300	158	79	17
1990	330	330	165	82.5	17
1991	365	365	182.5	91.25	17
1992	395	395	197.5	98.75	22
1993	410	410	205	102.5	25
1994	425	425	212.5	106.25	25.5

CANADIAN DENTAL ASSOCIATION
PROVISIONAL 1994 BUDGET

AN INTRODUCTION TO THE 1994 BUDGET

The following notes are intended to facilitate your review of the 1994 CDA budget.

GENERAL

The budget process involves initially the senior staff who, after consultation with Committee Chairmen, develop an activity plan for each of the project areas they manage. Numbers are then attached to this plan, using previous financial statements and other indicators, to form a draft budget.

Having received general direction from Management on CDA's financial objectives, staff meet to review the global budget and to discuss modifications. These modifications are made to the point where staff believe programs can be run effectively albeit sometimes without being able to adopt all project initiatives.

If after these adjustments the budget still does not meet the objectives set by Management, staff meet with Management to determine what project areas should be altered or terminated. They also look at areas where fees and other sources of income could be raised.

Once the changes are made, the draft budget is presented to Executive Council, for the first time, at its January meeting. Management seeks approval for the programming changes recommended to achieve its objectives. Once approved, the budget is then presented to the Board of Governors at the Interim meeting as a provisional budget. This budget, including any changes ordered by the Board, is used for moving the planning process ahead for the next year.

Of course, the needs and resources of the Association continue to evolve and change over time. Accordingly, the budget is subjected to a second look at the Fall Planning Session where the new Executive has an opportunity to look at the budget it will be using. As well, the budget is compared to the actual results at that time to determine if any anomalies exist.

Any changes recommended by the Executive are then introduced into the budget and, provided it does not materially affect the bottom line, the adjusted budget is adopted. If the bottom line is affected, then Management again reviews the programs to determine what further adjustments are required to achieve its financial objectives. Regardless of the level of change, the budget is again presented to the Board of Governors at the Interim Meeting.

PRESENTATION

The 1994 budget is presented in sections, each with a different degree of detail. In each case, expenses are grouped by service centre. The groupings are Executive Services, encompassing the Board of Governors, Executive Council, Management Committee and other project areas related to the corporate operations of the organization; Professional Services, encompassing those programs that are directly related to the practice of dentistry; Member Services, encompassing those programs that are related more to dental practice management and Administration.

Section 1 (page 6) is the projected income statement showing revenue and expenditure by service centre. It shows the "bottom line" as either a surplus or (deficit). For information, a column is included to show the percentage change between the 1994 and 1993 budgets.

Section 2 (pages 7-9) provides more detail showing revenue and expenses by project area. Again, for information, a column is included in this section to show the percentage change between the 1994 and 1993 budgets.

Section 3 (pages 10-17) provides schedules of more detailed information on revenues and expenditures. The percentage change between the 1994 and 1993 budgets is shown again.

Where practical, expenses normally considered part of "overhead" are allocated to the appropriate project area within each department. Readers should be aware, however, that project area expenses do not include any overhead charges such as staff costs, equipment or other support services. These expenses are grouped under the general administration area and represent a significant cost of operating the various project areas. Management believes that costs associated with breaking out overhead expenses by project area, given that only subjective allocations are currently possible, do not warrant the exercise.

1993 ADJUSTED BUDGET AND 1992 ACTUALS

Included in this presentation, for comparative purposes, are the 1993 adjusted budget and the 1992 "actual" results. Readers should be cautioned that the actual results represent an unaudited statement of CDA's revenue and expenditures to December 31, 1992 and the numbers are subject to change.

BUDGET NOTES

Where the change in budget is not significant please note an explanation may not be provided.

REVENUE

Fees

The budget incorporates the following fee structure:

Active	\$425.00	Retired Member	\$106.25
Affiliate	\$425.00	Student Member	\$ 25.00
Supporting Member	\$212.50	New Grad Member	\$410.00
Corporate Fee	\$ 15.00	Licensing Body Grant	\$ 22.00

In each case the budget is forecast using the numbers of individuals from/for whom payments were received in 1992 multiplied by the new rate.

FDI fees represent the net difference between what CDA collects from FDI subscribers and what is, in the end, remitted to FDI. Any difference is due primarily to foreign exchange. CDA uses this difference, which is designed to be in its favour, to defray costs of related promotion and administration.

Other Revenue

Accreditation revenue has been increased to reflect the number of surveys planned and a revised fee schedule.

The Consumer Product Recognition program has been expanded to include chewing gum and increased revenue has been budgeted accordingly.

The DAT program budget has been based on having approximately the same number of candidates take the test. The income is largely from application fees but includes the sale of additional study material as well.

The Information Services revenue budget reflects continued strong sales, particularly of the DIS series of pamphlets.

The Library Services budget represents revenue from a grant from the Canadian Dental Foundation and from modest user fees levied to defray incidental expenses. The budget is comparable to 1993 but below prior years reflecting depressed interest rates.

Revenue from Conferences and Seminars, including tax seminars and grants from CFDE for the teaching and student conferences is expected to remain relatively constant. Based on anticipated workload, however, the administration fee charged to the Convention account, for the 1994 FDI Congress has been increased.

Continued strong growth in advertising sales has provided the basis for increasing the Journal revenue budget. Excluding overhead costs, but also not accounting for potential revenue from advertising CDA services (e.g. Annual Dental Meeting), the Journal is expected to break even.

Property revenue is conservatively reduced in 1994 reflecting the end of the lease with CMA for the bulk of the rentable area. The CMA does have an option on the space but does not have to exercise the option until six months prior to the end, of the lease December 1993.

Interest income, despite reduced rates, is expected to grow modestly as CDA rebuilds its cash reserves.

Other income, largely based on foreign exchange and royalties, is budgeted to be the same as previous years.

EXPENSES

Executive Services

The Board of Governors budget was increased to reflect higher airfares given the Vancouver venue and anticipated increased fares. Two one-day meetings are planned.

Management Committee expenses are also expected to go up due to anticipated higher airfares and to reflect actual costs incurred in prior years.

Budgeting for media training costs, postponed from 1993, increased the Executive Council budget.

President's expenses have been increased to reflect higher air fares.

The FDI budget reflects the Vancouver venue of the FDI Congress and a decision to charge any travel costs of CDA delegates to the Congress.

The Nominations, Awards and Trusts budget is up to cover a portion of the Awards Luncheon which has in the past been partially absorbed in the Board budget.

The budget for new projects is set at \$50,000, similar to 1992, whereas in 1993 it was cut back to \$35,000 reflecting a need to balance the budget. This budget item is used to fund unforeseen program initiatives.

Professional Services

The Accreditation budget was increased in anticipation of increased travel costs and factoring in the schedule of surveys.

The Consumer Product Recognition Committee has been increased to provide for extra work expected in this area. As noted on the revenue side, revenue projections are also increased.

The DAT budget has been decreased substantially due to the use of soap instead of chalk.

No budget has been provided for the Dental Specialties Committee.

The Education budget provides for higher travel costs but also provides for higher expenses related to the Annual Teaching Conference. In past years registration fee income has helped to defray costs.

The Community and Institutional Dentistry budget reflects the anticipated workload.

No budget has been provided for the Professional Resource Utilization Committee.

Member Services

The Government Relations budget has been increased to allow CDA to host a dinner for government officials .

The Communications Steering Group area encompasses a number of project areas: The Communications Steering Committee, Dental Awareness Program, Dental Awareness Special Projects (Corporate Sponsored Programs), General Information Services and Merchandising. The budget reflects inflationary type increases from 1993 budget levels. It should be noted that the merchandise budget is very much a factor of sales. As well, monies allocated for the Expendent project, originally budgeted in 1993 have been carried forward in 1994.

The Insurance and Investment budget provides funding for legal fees as well as expenses related to CDA's promotion and administration of the plans and services.

The Library budget has been increased modestly.

The Membership budget includes the cost of Membership Services Committee meetings as well as promotion which includes the paper campaign, the membership booth, speakers' tours, advertisements, information kits, brochures and other miscellaneous expenditures. It is important, to note that many of these dollars are spent to promote CDA across Canada and not just in the "voluntary" provinces. Approximately one quarter of the promotion budget is spent on programs delivered or available to dentists across Canada.

The Publications budget was increased modestly by 3.5%.

Administration

In the area of Staffing, each department's budget has been increased modestly to allow for an increase in wages to be awarded based on performance. Budgets also reflect the pared down staff compliment at CDA, although provision has been made in the Member Services area for the hiring of a writer in 1993, and to replace support staff in the library, currently vacant.

In both the areas of Operations and Property, increases have been limited to modest increases of 3.5% of the 1993 budget. The operating budget provides for equipment purchases, for both new and replacement equipment. Several purchase decisions were postponed in 1992. It should also be noted the property budget includes mortgage expense and the increase from 1992 actual expense is due largely to the fact that only 9 months of interest expense was incurred in 1992.

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'l)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
REVENUE						
FEES	\$4,228,083	\$4,046,134	\$4,135,342	\$3,906,891	\$3,995,321	104.5%
OTHER	1,831,265	1,746,227	1,718,227	1,756,127	1,614,100	104.9%
TOTAL REVENUE	\$6,059,348	\$5,792,361	\$5,853,569	\$5,663,018	\$5,609,421	104.6%
EXPENSE						
EXECUTIVE SERVICES	\$638,110	\$591,349	\$639,900	\$552,057	\$641,075	101.9%
PROFESSIONAL SERVICES	403,975	385,141	445,141	355,252	378,149	104.9%
MEMBER SERVICES	1,657,160	1,634,278	1,534,179	1,655,108	1,521,155	101.4%
ADMINISTRATION	3,303,295	3,142,616	3,233,940	2,978,400	3,154,840	105.1%
TOTAL EXPENSE	\$6,002,540	\$5,753,384	\$5,853,160	\$5,540,818	\$5,695,219	104.3%
NET SURPLUS / (DEFICIT)	\$56,808	\$38,977	\$409	\$122,200	(\$85,798)	145.7%

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
FEES						
Active Fees	\$3,342,200	\$3,226,290	\$3,479,670	\$3,105,704	\$3,352,365	103.6%
Affiliate Fees	346,375	334,150	157,031	322,123	151,285	103.7%
Supporting Fees	12,963	14,453	13,940	11,949	13,430	89.7%
Retired Fees	10,731	10,345	11,070	9,875	10,665	103.7%
Student Fees	40,000	45,125	57,293	40,320	51,238	88.6%
Corporate Fees	160,478	127,362	131,148	128,382	131,148	126.0%
Licensing Body Grants	315,337	285,910	280,190	286,670	280,190	110.3%
FDI Fees	0	2,500	5,000	1,869	5,000	0.0%
Total	\$4,228,083	\$4,046,134	\$4,135,342	\$3,906,891	\$3,995,321	104.5%
OTHER						
Accreditation Surveys	\$98,388	\$79,600	\$79,600	\$89,710	\$79,600	123.6%
Consumer Product Recognition	85,000	62,000	50,000	38,009	40,000	137.1%
D A T	316,750	310,000	300,000	325,779	300,000	102.2%
Information Services	225,000	207,000	207,000	269,469	200,000	108.7%
Library Services	147,500	147,500	193,500	110,293	193,500	100.0%
Conferences & Seminars	71,000	62,000	62,000	61,507	55,000	114.5%
Journal	740,000	716,000	666,000	715,050	640,000	103.4%
Property	56,627	81,127	79,127	63,265	25,000	69.8%
Interest	40,000	30,000	30,000	35,986	30,000	133.3%
Other	51,000	51,000	51,000	47,057	51,000	100.0%
Total	\$1,831,265	\$1,746,227	\$1,718,227	\$1,756,127	\$1,614,100	104.9%

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
EXECUTIVE SERVICES						
Board of Governors	\$141,857	\$135,309	\$146,309	\$133,797	\$148,947	104.8%
Executive Council	116,252	112,065	119,065	89,021	106,307	103.7%
Management Committee	176,170	167,747	174,798	170,747	170,643	105.0%
President's Expenses	83,194	72,855	68,855	77,312	72,600	114.2%
Constitution & By-Laws	1,600	1,500	1,500	1,198	1,878	106.7%
F.D.I.	28,500	28,288	55,788	45,140	53,250	100.7%
Intercompany Relations	22,440	23,000	23,000	20,701	22,400	97.6%
Nominations	18,097	15,585	15,585	14,141	15,050	116.1%
New Projects	50,000	35,000	35,000	0	50,000	142.9%
Total	\$638,110	\$591,349	\$639,900	\$552,057	\$641,075	107.9%
PROFESSIONAL SERVICES						
Accreditation	\$156,925	\$150,900	\$135,900	\$143,186	\$132,500	104.0%
Consumer Product Recognition	17,500	16,167	16,167	12,408	12,500	108.2%
DAT	159,400	159,050	209,050	137,073	150,225	100.2%
Dental Mat. & Devices	10,400	9,739	9,739	6,841	8,700	106.8%
Dental Specialties	0	0	7,976	8,516	7,500	
Education	36,150	30,807	34,807	16,809	32,500	117.3%
Ethics	2,000	2,000	6,053	4,258	7,344	100.0%
Commun. & Institution	21,600	16,478	16,478	26,139	14,380	131.1%
PRUC	0	0	8,971	22	12,500	
Total	\$403,975	\$385,141	\$445,141	\$355,252	\$378,149	104.9%

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'l)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft..Bgt./ 93 Adj.Bgt.
MEMBER SERVICES						
Government Relations	\$11,285	\$6,072	\$12,072	\$5,727	\$10,000	185.9%
Com. Steering	374,153	361,500	348,500	438,852	291,360	103.5%
Insurance & Investment	61,000	103,000	3,000	145,122	103,000	59.2%
Library	56,869	54,946	54,946	41,803	43,850	103.5%
Membership	165,600	160,000	180,000	126,103	160,000	103.5%
Publications	847,148	818,500	793,401	772,003	774,050	103.5%
Student Affairs	104,490	94,193	94,193	99,313	91,895	110.9%
Taxation Committee	6,400	6,872	8,872	3,532	10,000	93.1%
Third Party Plans	30,217	29,195	39,195	22,654	37,000	103.5%
Total	\$1,657,160	\$1,634,278	\$1,534,179	\$1,655,108	\$1,521,155	101.4%
ADMINISTRATION						
Exec. Services Staff	\$446,084	\$445,148	\$446,145	\$422,458	\$427,255	100.2%
Prof. Services Staff	442,621	427,732	424,310	446,998	443,365	103.5%
Memb. Services Staff	765,005	675,465	720,020	640,939	690,600	113.3%
Admin. Services Staff	463,651	448,137	496,445	437,338	475,600	103.5%
Operations	584,500	564,900	565,300	505,870	551,200	103.5%
Property	601,434	581,234	581,720	524,796	566,820	103.5%
Total	\$3,303,295	\$3,142,616	\$3,233,940	\$2,978,400	\$3,154,840	105.1%

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
FEEs						
Active Fees - Newfoundland	\$58,650	\$56,580	\$56,170	54,510	\$54,115	103.7%
Active Fees - P.E.I.	19,125	18,450	18,450	17,775	17,775	103.7%
Active Fees - Nova Scotia	178,925	172,610	169,330	166,295	163,135	103.7%
Active Fees - N.B.	95,200	92,250	90,200	88,648	86,900	103.2%
Active Fees - Quebec	240,550	231,650	390,730	223,590	376,435	103.8%
Active Fees - Ontario	983,450	958,170	1,081,580	914,027	1,042,010	102.6%
Active Fees - Manitoba	210,800	203,770	200,900	195,723	193,550	103.4%
Active Fees - Saskatchewan	140,250	136,120	136,530	130,183	131,535	103.0%
Active Fees - Alberta	570,350	550,220	535,460	529,893	515,870	103.7%
Active Fees - B.C.	844,900	806,470	800,320	785,063	771,040	104.8%
Affiliate Fees - Newfoundland	0	0	0	0	0	
Affiliate Fees - P.E.I.	0	0	0	0	0	
Affiliate Fees - Nova Scotia	0	0	0	0	0	
Affiliate Fees - N.B.	0	0	0	0	0	
Affiliate Fees - Quebec	215,050	207,460	126,280	294,473	121,660	103.7%
Affiliate Fees - Ontario	122,925	118,490	18,040	19,750	17,380	103.7%
Affiliate Fees - Manitoba	0	0	0	0	0	
Affiliate Fees - Saskatchewan	0	0	0	0	0	
Affiliate Fees - Alberta	0	0	0	0	0	
Affiliate Fees - B.C.	0	0	0	0	0	
Affiliate Fees - Other	8,500	8,200	12,711	7,900	12,245	103.7%
Supporting Fees - Newfoundland	0	0	0	0	0	
Supporting Fees - P.E.I.	0	0	0	0	0	
Supporting Fees - Nova Scotia	0	0	0	0	0	
Supporting Fees - N.B.	0	0	0	0	0	
Supporting Fees - Quebec	850	718	616	691	593	118.5%
Supporting Fees - Ontario	6,163	5,945	5,124	5,728	4,937	103.7%
Supporting Fees - Manitoba	0	0	206	0	198	
Supporting Fees - Saskatchewan	0	0	1,026	0	988	
Supporting Fees - Alberta	0	0	204	0	197	
Supporting Fees - B.C.	425	410	0	395	0	
Supporting Fees - Other	5,525	7,380	6,764	5,135	6,517	74.9%
Retired Fees - Newfoundland	213	205	103	198	99	103.7%
Retired Fees - P.E.I.	106	103	103	99	99	103.7%
Retired Fees - Nova Scotia	319	308	103	296	99	103.7%
Retired Fees - N.B.	0	0	206	-91	198	
Retired Fees - Quebec	2,655	2,563	1,947	2,469	1,876	103.7%
Retired Fees - Ontario	4,994	4,818	3,896	4,641	3,753	103.7%
Retired Fees - Manitoba	319	308	103	296	99	103.7%
Retired Fees - Saskatchewan	213	205	0	198	0	103.7%
Retired Fees - Alberta	638	615	103	593	99	103.7%
Retired Fees - B.C.	956	923	820	889	790	103.7%
Retired Fees - Other	319	300	3,688	289	3,553	106.4%

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
Student Fees - Newfoundland	0	0	0	50	0	
Student Fees - P.E.I.	0	0	0	75	0	
Student Fees - Nova Scotia	2,850	3,225	4,227	2,506	3,780	88.4%
Student Fees - N.B.	0	25	0	22	0	0.0%
Student Fees - Quebec	14,750	15,500	21,163	13,988	16,000	95.2%
Student Fees - Ontario	9,750	10,425	12,471	12,311	11,153	93.5%
Student Fees - Manitoba	2,100	2,450	5,774	1,855	5,164	85.7%
Student Fees - Saskatchewan	2,275	2,525	3,177	2,019	2,841	90.1%
Student Fees - Alberta	4,000	4,000	4,895	4,022	4,378	100.0%
Student Fees - B.C.	3,100	3,850	5,063	2,741	4,528	80.5%
Student Fees - Other	1,175	3,125	523	731	468	37.6%
Corporate Fees - Newfoundland	2,160	1,728	1,644	1,728	1,644	125.0%
Corporate Fees - P.E.I.	690	552	612	552	612	125.0%
Corporate Fees - Nova Scotia	6,360	5,088	5,868	5,088	5,868	125.0%
Corporate Fees - N.B.	3,675	2,940	3,360	2,940	3,360	125.0%
Corporate Fees - Quebec	23,115	18,492	16,068	18,492	16,068	125.0%
Corporate Fees - Ontario	55,955	45,000	53,856	45,564	53,856	126.6%
Corporate Fees - Manitoba	7,643	6,114	5,844	6,114	5,844	125.0%
Corporate Fees - Saskatchewan	5,520	4,380	4,428	4,416	4,428	126.0%
Corporate Fees - Alberta	21,480	17,136	16,176	17,184	16,176	125.4%
Corporate Fees - B.C.	32,880	25,932	23,292	26,304	23,292	126.8%
Licensing Body Grant - Newfoundland	3,146	2,860	2,920	2,860	2,920	110.0%
Licensing Body Grant - P.E.I.	1,034	940	980	940	980	110.0%
Licensing Body Grant - Nova Scotia	9,328	8,480	8,360	8,480	8,360	110.0%
Licensing Body Grant - N.B.	5,390	4,900	4,780	4,900	4,780	110.0%
Licensing Body Grant - Quebec	68,112	61,920	61,600	61,920	61,600	110.0%
Licensing Body Grant - Ontario	129,294	117,540	114,000	117,540	114,000	110.0%
Licensing Body Grant - Manitoba	11,209	10,190	10,120	10,190	10,120	110.0%
Licensing Body Grant - Saskatchewan	8,096	7,300	7,230	7,360	7,230	110.9%
Licensing Body Grant - Alberta	31,504	28,560	27,900	28,640	27,900	110.3%
Licensing Body Grant - B.C.	48,224	43,220	42,300	43,840	42,300	111.5%
FDI Fees (Receipts less payments)	0	2,500	5,000	1,869	5,000	0.0%
Total	\$4,228,083	\$4,046,134	\$4,135,342	\$3,906,891	\$3,995,321	104.5%

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
OTHER						
Accreditation - Colleges	\$28,328	\$23,500	\$23,500	\$25,360	\$23,500	120.5%
Accreditation - Universities	19,590	15,600	15,600	15,600	15,600	125.6%
Accreditation - Hospitals	14,470	4,500	4,500	12,750	4,500	321.6%
Accreditation - NDEB Grant	36,000	36,000	36,000	36,000	36,000	100.0%
Consumer Product Recognition - Fees	85,000	62,000	50,000	38,009	40,000	137.1%
D A T - Application Fees	232,350	275,000	275,000	259,664	275,000	84.5%
D A T - Material Sales	84,400	35,000	25,000	66,115	25,000	241.1%
Info. Services - Merchandise Sales	225,000	207,000	207,000	269,469	200,000	108.7%
Library Services - CDF Grant	127,500	127,500	177,500	95,800	179,000	100.0%
Library Services - Charges	20,000	20,000	16,000	14,493	14,500	100.0%
Conf. & Sem. - Teach. - CFDE Grant	10,000	11,000	11,000	8,000	10,000	90.9%
Conf. & Sem. - Stud. - CFDE Grant	11,000	11,000	11,000	11,000	10,000	100.0%
Conf. & Sem. - Annual Conv. (net)	50,000	40,000	40,000	40,000	35,000	125.0%
Conf. & Sem. - Taxation (net)	0	0	0	4,827	0	
Conf. & Sem. - Other (net)	0	0	0	-2,319	0	
Journal - Commercial Advertising	655,000	631,000	619,000	631,769	596,000	103.8%
Journal - Classified Advertising	60,000	60,000	22,000	59,608	22,000	100.0%
Journal - Subscriptions Sales	25,000	25,000	23,000	23,633	22,000	100.0%
Journal - Reprints Sales	0	0	2,000	40	0	
Property - Rental - O.D.S.	3,871	3,871	3,871	3,871	3,750	100.0%
Property - Rental - Wayne Thomas	4,680	4,680	4,680	4,680	2,850	100.0%
Property - Rental - F.M.W.	5,121	5,121	5,121	5,121	3,000	100.0%
Property - Rental - ACFD	7,056	7,056	7,056	7,056	7,000	100.0%
Property - Rental - CFDE	4,800	4,800	4,800	4,800	4,800	100.0%
Property - Rental - CMA	26,000	51,000	50,000	33,333	0	51.0%
Property - Rental - Parking	3,600	3,600	3,600	3,660	3,600	100.0%
Property - Rental - Escalations	1,500	1,000	0	744	0	
Interest - Term Deposits	20,000	0	0	21,182	0	
Interest - Current Account	20,000	30,000	30,000	14,804	30,000	66.7%
Other - Royalties	25,000	25,000	25,000	14,892	25,000	100.0%
Other - Foreign Exchange	1,000	1,000	1,000	1,409	1,000	100.0%
Other - Miscellaneous	25,000	25,000	25,000	30,757	25,000	100.0%
Total	\$1,831,265	\$1,746,227	\$1,718,227	\$1,756,127	\$1,614,100	104.9%

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'l)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
EXECUTIVE SERVICES						
Board of Governors/Travel	\$45,400	\$31,800	\$31,800	\$29,742	\$37,100	142.8%
Board Of Governors/Accommodation	31,300	28,980	28,980	30,994	30,960	108.0%
Board of Governors/PD	28,457	33,579	40,579	33,431	38,787	84.7%
Board Of Governors/Other	36,700	40,950	44,950	39,630	42,100	89.6%
Executive Council/Travel	19,600	19,600	19,600	13,737	18,200	100.0%
Executive Council/Accommodation	21,290	20,815	20,815	19,109	15,587	102.3%
Executive Council/PD	53,817	54,655	54,655	40,062	45,000	98.5%
Executive Council/Other	5,000	6,500	6,500	9,675	7,500	76.9%
Executive Council Expense/Travel	2,000	1,000	3,000	116	3,000	200.0%
Executive Council Expense/Accommodation	5,520	5,520	5,520	1,149	5,520	100.0%
Executive Council Expense/PD	3,025	2,975	2,975	858	5,500	101.7%
Executive Council Expense/Other	6,000	1,000	6,000	4,315	6,000	600.0%
Management Committee/Travel	4,000	5,000	5,000	843	4,000	80.0%
Management Committee/Accommodation	5,000	6,140	6,140	2,508	4,000	81.4%
Management Committee/PD	17,360	16,207	16,207	16,400	12,960	107.1%
Management Committee/Other	2,000	2,000	2,000	1,515	3,500	100.0%
Management Committee/Honoraria	96,550	92,840	94,891	91,243	91,243	104.0%
Management Committee Expense/Travel	6,240	5,000	6,000	7,269	7,000	124.8%
Management Committee Expense/Accommodation	4,160	4,000	4,000	4,958	5,000	104.0%
Management Committee Expense/PD	17,360	13,060	17,060	21,115	19,440	132.9%
Management Committee Expense/Other	23,500	23,500	23,500	24,895	23,500	100.0%
President's Expenses/Travel	23,700	17,000	13,000	20,760	16,000	139.4%
President's Expenses/Accommodation	7,910	9,000	9,000	5,974	9,000	87.9%
President's Expenses/PD	32,984	29,855	29,855	31,813	29,600	110.5%
President's Expenses/Other	2,000	2,000	2,000	2,493	2,000	100.0%
President's Expenses/Installation	16,600	15,000	15,000	16,271	16,000	110.7%
Constitution & By-Laws/Travel	0	0	0	0	0	
Constitution & By-Laws/Accommodation	0	0	0	0	1,000	
Constitution & By-Laws/PD	0	0	0	0	378	
Constitution & By-Laws/Other	1,600	1,500	1,500	1,198	500	106.7%
F.D.I. - Congress/Travel	0	3,188	13,188	7,494	10,150	0.0%
F.D.I. - Congress/Accommodation	0	1,500	16,500	9,612	15,500	0.0%
F.D.I. - Congress/Other	0	500	500	2,306	2,000	0.0%
F.D.I. - Corporate Fee	25,000	22,100	22,100	25,711	22,100	113.1%
F.D.I. - Administration	3,500	1,000	3,500	16	3,500	350.0%
Intercompany Relations/Travel	11,440	11,500	11,500	10,879	11,500	99.5%
Intercompany Relations/Accommodation	9,000	9,500	9,500	9,059	10,400	94.7%
Intercompany Relations/Other	2,000	2,000	2,000	764	500	100.0%
Nominations/Travel	6,100	5,900	5,900	4,722	2,400	103.4%
Nominations/Accommodation	3,320	2,920	2,920	2,331	1,840	113.7%
Nominations/PD	865	853	853	0	810	101.4%
Nominations/Other	1,500	1,000	1,000	7,088	500	150.0%
Nominations/Awards	6,312	4,912	4,912	0	9,500	128.5%
New Projects/Travel	10,000	5,000	5,000	0	10,000	200.0%
New Projects/Accommodation	10,000	5,000	5,000	0	10,000	200.0%
New Projects/PD	10,000	5,000	5,000	0	10,000	200.0%
New Projects/Other	20,000	20,000	20,000	0	20,000	100.0%
110						
Total	\$638,110	\$591,349	\$639,900	\$552,057	\$641,075	107.5%

CANADIAN DENTAL ASSOCIATION

1994 BUDGET

93/3/19 (BUDGET94.XLS)

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
PROFESSIONAL SERVICES						
Accreditation/Travel	\$27,300	\$16,000	\$16,000	\$18,886	\$11,650	170.6%
Accreditation/Accommodation	16,750	10,000	10,000	9,605	9,825	167.5%
Accreditation/PD	1,600	7,000	7,000	378	10,080	22.9%
Accreditation/Other	8,000	16,900	1,900	11,029	2,500	47.3%
Accreditation/University Surveys	32,692	40,000	40,000	52,492	52,521	81.7%
Accreditation/College Surveys	35,092	50,000	50,000	30,743	32,968	70.2%
Accreditation/Hospital Surveys	35,491	11,000	11,000	20,053	12,956	322.6%
Consumer Product Recognition/Travel	9,800	8,500	8,500	6,112	4,700	115.3%
Consumer Product Recognition/Accommodati	3,500	4,000	4,000	1,818	2,700	87.5%
Consumer Product Recognition/PD	3,000	3,000	3,000	3,136	4,600	100.0%
Consumer Product Recognition/Other	1,200	667	667	1,342	500	179.9%
DAT/Travel	25,300	19,750	19,750	15,152	10,500	128.1%
DAT/Accommodation	15,750	20,000	20,000	7,675	7,875	78.8%
DAT/PD	6,000	2,000	2,000	4,697	1,880	300.0%
DAT/Other	2,500	2,500	2,500	6,035	2,500	100.0%
DAT/Test Program	109,850	114,800	164,800	103,515	127,470	95.7%
Dental Mat. & Devices/Travel	4,900	3,500	3,500	3,767	3,850	140.0%
Dental Mat. & Devices/Accommodation	3,000	4,500	4,500	1,416	2,700	66.7%
Dental Mat. & Devices/PD	1,500	1,000	1,000	950	1,400	150.0%
Dental Mat. & Devices/Other	1,000	739	739	708	750	135.3%
Dental Specialties/Travel	0	0	4,000	5,552	3,100	
Dental Specialties/Accommodation	0	0	1,500	1,156	2,000	
Dental Specialties/PD	0	0	1,976	1,236	1,900	
Dental Specialties/Other	0	0	500	571	500	
Education/Travel	9,800	4,500	6,500	7,245	6,785	217.8%
Education/Accommodation	5,150	6,500	8,500	1,505	7,075	79.2%
Education/PD	3,400	2,000	2,000	950	2,640	170.0%
Education/Other	1,800	2,000	2,000	1,289	2,500	90.0%
Education/Teaching Conference	16,000	15,807	15,807	5,819	13,500	101.2%
Ethics/Travel	0	0	2,750	0	3,300	
Ethics/Accommodation	0	0	1,315	0	2,400	
Ethics/PD	0	0	988	0	1,144	
Ethics/Other	2,000	2,000	1,000	4,258	500	100.0%
Commun. & Institution/Travel	12,600	7,000	7,000	8,392	3,880	180.0%
Commun. & Institution/Accommodation	4,500	8,000	8,000	5,234	4,200	56.3%
Commun. & Institution/PD	3,000	1,000	1,000	5,613	4,300	300.0%
Commun. & Institution/Other	1,500	478	478	6,901	2,000	313.8%
PRUC/Travel	0	0	3,500	0	4,530	
PRUC/Accommodation	0	0	2,500	0	3,330	
PRUC/PD	0	0	2,471	0	2,140	
PRUC/Other	0	0	500	22	2,500	
Total	\$403,975	\$385,141	\$445,141	\$355,252	\$378,149	104.9%

CANADIAN DENTAL ASSOCIATION

1994 BUDGET

93/3/19 (BUDGET94.XLS)

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
MEMBER SERVICES						
Government Relations/Travel	0	\$0	\$0	\$17	\$600	
Government Relations/Accommodation	0	0	0	890	500	
Government Relations/PD	1,766	1,706	1,706	0	1,720	103.5%
Government Relations/Other	5,518	500	6,500	4,817	3,000	1103.5%
Ad Hoc Com. on MSB/Travel	1,656	1,600	1,600	0	1,600	103.5%
Ad Hoc Com. on MSB/Accommodation	476	460	460	0	460	103.5%
Ad Hoc Com. on MSB/PD	1,766	1,706	1,706	0	1,620	103.5%
Ad Hoc Com. on MSB/Other	104	100	100	3	500	103.5%
Com. Steering/Travel	5,279	5,100	5,100	2,761	4,000	103.5%
Com. Steering/Accommodation	5,279	5,100	5,100	995	4,000	103.5%
Com. Steering/PD	10,609	10,250	10,250	4,624	10,000	103.5%
Com. Steering/Other	2,122	2,050	2,050	3,311	2,000	103.5%
Com. Steering/DHM	3,493	3,375	15,375	17,248	15,000	103.5%
Com. Steering/DAP	82,800	80,000	80,000	85,357	80,000	103.5%
Com. Steering/DAPS	0	0	0	23,987	0	
Com. Steering/Merchandise	212,175	205,000	180,000	270,526	151,360	103.5%
Com. Steering/Services	52,397	50,625	50,625	30,043	25,000	103.5%
Insurance & Investment/Travel	5,000	0	0	4,322	0	
Insurance & Investment/Accommodation	2,000	0	0	1,236	0	
Insurance & Investment/PD	3,000	0	0	1,640	0	
Insurance & Investment/Other	51,000	103,000	3,000	137,924	103,000	49.5%
Library/Services	56,869	54,946	54,946	41,803	43,850	103.5%
Membership/Travel	4,244	4,100	4,100	2,884	4,000	103.5%
Membership/Accommodation	4,244	4,100	4,100	1,471	4,000	103.5%
Membership/PD	3,607	3,485	3,485	1,716	3,400	103.5%
Membership/Other	5,304	5,125	5,125	704	5,000	103.5%
Membership/Promotion	148,202	143,190	163,190	119,327	143,600	103.5%
Publications/Newsletter	106,088	102,500	102,500	89,472	100,000	103.5%
Publications/Annual Report & Dir.	0	0	0	0	0	
Publications/Journal Production	527,850	510,000	537,151	483,369	524,050	103.5%
Publications/Journal Sales	213,210	206,000	153,750	199,162	150,000	103.5%
Student Affairs/Travel	7,835	7,570	7,570	2,743	7,385	103.5%
Student Affairs/Accommodation	7,387	7,137	7,137	1,858	6,963	103.5%
Student Affairs/PD	1,695	1,638	1,638	2,811	1,598	103.5%
Student Affairs/Other	1,028	993	993	185	969	103.5%
Student Affairs/Promotion	73,814	64,555	64,555	79,002	62,980	114.3%
Student Affairs/Student Conf.	12,731	12,300	12,300	12,713	12,000	103.5%
Taxation Committee/Travel	3,000	3,000	3,000	1,578	4,000	100.0%
Taxation Committee/Accommodation	800	800	800	218	1,600	100.0%
Taxation Committee/PD	1,600	1,572	1,572	977	3,024	101.8%
Taxation Committee/Other	1,000	1,500	3,500	759	1,376	66.7%
Third Party Plans/Travel	11,069	10,695	14,695	7,926	12,500	103.5%
Third Party Plans/Accommodation	8,798	8,500	12,500	6,822	12,500	103.5%
Third Party Plans/PD	4,140	4,000	5,000	5,271	5,000	103.5%
Third Party Plans/Other	4,140	4,000	5,000	2,618	5,000	103.5%
Third Party Plans/P I P (Net)	2,070	2,000	2,000	17	2,000	103.5%
112						
Total	\$1,657,160	\$1,634,278	\$1,534,179	\$1,955,108	\$1,521,155	101.4%

CANADIAN DENTAL ASSOCIATION

1994 BUDGET

93/3/19 (BUDGET94.XLS)

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
ADMINISTRATION						
Executive Staff/Travel	\$11,500	\$11,500	\$11,500	\$11,405	\$11,000	100.0%
Executive Staff/Accommodation	10,500	11,500	11,500	5,901	11,000	91.3%
Executive Staff/Other	9,500	9,500	9,500	7,795	9,000	100.0%
Executive Staff/Payroll	333,176	336,189	336,648	319,997	323,700	99.1%
Executive Staff/Temporary	2,500	2,500	2,500	0	2,500	100.0%
Executive Staff/Benefits	72,408	69,959	67,497	76,922	63,555	103.5%
Executive Staff/Training	2,500	2,000	3,000	383	2,500	125.0%
Executive Staff/Advertising & Fees	2,000	0	2,000	0	2,000	
Executive Staff/Miscellaneous	2,000	2,000	2,000	56	2,000	100.0%
Prof. Services Staff/Travel	9,500	10,500	10,500	8,992	10,000	90.5%
Prof. Services Staff/Accommodation	7,500	8,500	8,500	6,161	8,000	88.2%
Prof. Services Staff/Other	5,500	5,500	5,500	6,257	5,000	100.0%
Prof. Services Staff/Payroll	342,360	330,779	331,900	356,342	355,100	103.5%
Prof. Services Staff/Temporary	2,500	2,500	2,500	454	2,500	100.0%
Prof. Services Staff/Benefits	68,261	65,953	58,410	57,266	56,285	103.5%
Prof. Services Staff/Training	3,000	2,000	3,000	1,210	2,500	150.0%
Prof. Services Staff/Advertising & Fees	2,000	0	2,000	0	2,000	
Prof. Services Staff/Miscellaneous	2,000	2,000	2,000	10,317	2,000	100.0%
Member Services Staff/Travel	9,500	9,500	9,500	5,528	9,000	100.0%
Member Services Staff/Accommodation	6,500	7,500	7,500	2,259	7,000	86.7%
Member Services Staff/Other	5,500	6,500	6,500	3,163	6,000	84.6%
Member Services Staff/Payroll	634,465	542,216	574,800	516,540	552,700	117.0%
Member Services Staff/Temporary	22,500	22,500	22,500	10,874	21,000	100.0%
Member Services Staff/Benefits	77,540	79,749	86,220	82,025	82,900	97.2%
Member Services Staff/Training	5,000	3,000	5,000	1,115	4,000	166.7%
Member Services Staff/Advertising & Fees	2,000	2,500	6,000	2,189	6,000	80.0%
Member Services Staff/Miscellaneous	2,000	2,000	2,000	17,245	2,000	100.0%
Admin. Staff/Travel	3,000	3,500	3,500	2,176	3,500	85.7%
Admin. Staff/Accommodation	2,500	3,000	3,000	2,391	2,500	83.3%
Admin. Staff/Other	2,500	3,000	3,000	1,983	2,500	83.3%
Admin. Staff/Payroll	381,620	365,839	406,300	359,872	390,600	104.3%
Admin. Staff/Temporary	3,000	4,000	4,000	2,449	4,000	75.0%
Admin. Staff/Benefits	66,031	63,798	68,145	66,280	64,500	103.5%
Admin. Staff/Training	3,000	3,000	4,500	2,192	4,000	100.0%
Admin. Staff/Advertising & Fees	1,000	0	2,000	0	2,000	
Admin. Staff/Miscellaneous	1,000	2,000	2,000	-5	2,000	50.0%

CANADIAN DENTAL ASSOCIATION

1994 BUDGET

93/3/19 (BUDGET94.XLS)

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	1994 Budget (Draft)	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	94 Dft.Bgt./ 93 Adj.Bgt.
Operations/Travel	500	500	500	23	500	100.0%
Operations/Accommodation	500	500	500	46	500	100.0%
Operations/Facility R&C	6,000	5,800	6,000	4,450	5,500	103.4%
Operations/Printing	1,000	1,000	1,100	420	1,000	100.0%
Operations/Photocopying	2,000	1,800	1,600	1,656	1,500	111.1%
Operations/Translation	500	500	500	0	500	100.0%
Operations/Photography	500	500	500	17	0	100.0%
Operations/Postage	2,000	2,000	1,800	1,147	1,500	100.0%
Operations/Shipping And Delivery	7,000	7,000	5,000	10,367	5,000	100.0%
Operations/Electronic Mail & Fax	2,000	6,500	10,000	376	10,000	30.8%
Operations/Legal & Consulting	4,000	2,000	2,000	1,078	2,000	200.0%
Operations/Equip. Purchase & Rental	90,000	89,000	99,000	34,957	99,000	101.1%
Operations/Equip. Maintenance	18,000	12,000	9,000	14,595	8,500	150.0%
Operations/Office Supplies	15,000	16,000	17,500	13,205	17,000	93.8%
Operations/Stationary	42,000	39,000	40,000	40,867	38,000	107.7%
Operations/Dues Fees & Subs	1,200	1,300	1,300	554	1,200	92.3%
Operations/Software	6,000	6,000	8,000	3,151	8,000	100.0%
Operations/Telephone	124,000	121,000	121,000	117,648	115,000	102.5%
Operations/Admin. Charges	17,500	16,500	16,000	16,360	15,000	106.1%
Operations/G.S.T.	140,000	140,000	135,000	143,832	135,000	100.0%
Operations/Audit And Financial	18,800	18,000	18,000	23,800	17,000	104.4%
Operations/Equip. Dep'n.	60,000	52,000	52,000	51,526	52,000	115.4%
Operations/Insurance	16,000	16,000	16,000	13,208	15,000	100.0%
Operations/Miscellaneous	10,000	10,000	3,000	12,591	2,500	100.0%
Property/Rent	15,000	15,000	16,000	11,804	16,000	100.0%
Property/Other	4,200	4,200	1,200	1463.2	1000	100.0%
Property/Legal & Consulting	6,000	5,000	2,000	5,611	2,000	120.0%
Property/Utilities	69,000	60,000	60,000	72,706	58,500	115.0%
Property/HVAC	20,000	18,000	18,000	22,548	17,000	111.1%
Property/Cleaning	25,500	24,000	24,000	23,453	22,500	106.3%
Property/Security & Fire Inspection	3,200	3,200	3,200	5,848	2,500	100.0%
Property/Bldg. Main. & Repairs	15,000	12,000	12,000	17,725	8,000	125.0%
Property/Grounds Maintenance	12,000	12,000	12,000	9,457	10,000	100.0%
Property/Dep'n Expense	179,200	179,200	179,200	162,063	179,200	100.0%
Property/Mortgage	151,134	151,134	171,620	112,554	171,620	100.0%
Property/Insurance	8,000	7,500	7,500	6,169	6,000	106.7%
Property/Realty Tax	92,200	89,000	74,000	73,398	71,500	103.6%
Property/Miscellaneous	1,000	1,000	1,000	0	1,000	100.0%
Total	\$3,303,295	\$3,142,616	\$3,233,940	\$2,978,400	\$3,154,840	105.1%

CURRENT

ARTICLE XI - OFFICERS AND OFFICIALS

Section 7 - Roles and Responsibilities of the Management Committee

The Management Committee shall be a committee of the Executive Council and consist of four members, the Immediate Past-President, the President, the Vice-President, and the President-Elect who shall be the chairperson:

- (a) shall assure that all money securities, deeds and real property belonging to the Association are properly secured and accounted for.
- (b) shall provide advice to Executive Council on the Association's affairs.
- (c) shall perform such other duties as may be designated by the Executive Council or these By-Laws.
- (d) shall keep a Minute Book and report to the Executive Council.
- (e) shall review all budgets and financial statements presented by the President-Elect for the forthcoming year and the auditor's report prior to presentation to the Executive Council and Board of Governors.

CANADIAN DENTAL ASSOCIATION

ADJUSTED 1993 BUDGET

NOTES TO THE ADJUSTED 1993 BUDGET

A draft 1993 budget was first presented to the Board of Governors at the Interim Meeting held April 3-4, 1992. At the time, Governors were advised that the 1993 Budget was considered provisional until discussions impacting programming could take place at the Planning Session. It called for a surplus of \$409.

At the Planning Session, Executive Council added \$71,000 in new expense but also approved \$148,000 in expense reductions. In addition, members discussed but did not set budget numbers for the following: the 1993 recalculated payroll cost based on fewer staff members, an estimate of legal fees for the QDSA lawsuit, an estimate of membership revenue for 1993 based on the lacklustre 1992 results and the expected lower grant from the Canadian Dental Foundation for library operating expenses. The need for a \$100,000 surplus was also discussed.

Subsequent to the Planning Session, Management worked with staff to pare expenses further and, where possible, find additional sources of revenue. The changes to the original budget are summarized below. In total, expenses were decreased \$99,775 and revenue decreased \$61,207.

When these changes were added to the original surplus of \$409, the budget surplus increased to \$38,977.

Significant among the changes are the following:

- adjustments to fee income to reflect actual membership in 1992 (1993 budget numbers reflect no loss in the voluntary provinces and no gain in the mandatory provinces)
- a decrease in the anticipated grant from the Canadian Dental Foundation, as a result of depressed interest rates
- a small adjustment in property revenue reflecting lease terms
- decreased meeting expenses for the Board of Governors, reflecting the one-day interim meeting
- reduced Executive Council expense resulting from postponing media training
- reduced Management Committee expenses based on the revised schedule of meetings which includes holding the Interim Board Meeting at the time of the CDA Annual Dental Meeting.
- an increase in President's expenses as a result of reviewing actual expenses in 1992

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- reduced FDI (Congress) expense recognizing a decision to charge expenses against promotion of the 1994 Congress
- increased Accreditation expenses based on the anticipated survey load
- an increase in revenue from the Seal of Recognition program due to initiatives such as the chewing gum program
- a revised projection for the DAT program, reducing expenses to reflect the move to soap from chalk and an increase in the revenue forecast based on 1992 results
- a decrease in the Dental Specialties Committee budget reflecting a decision to re-vamp how consultation and dialogue is best achieved
- a reduction in the Council on Education budget reflecting actual costs in prior years
- a reduction in Ethics Committee costs based on projected workload
- a reduction in expenses related to PRUC based on perceived activity
- reduced Government Relations expenses based on a decision to cancel the government relations reception/dinner
- changes to the Communications Steering program including reduced Dental Health Month expenses reflecting a decision to provide only general coordination in this area, and increasing the merchandise expense budget to allow for costs related to the practice management program (ExperDent)
- an allowance, under Insurance and Investment, for legal fee expenses related to the QDSA lawsuit
- a reduction in Membership Committee expense related to promotion, reflecting 1992 actual expense and in-house management of this area
- a revised Publications budget forecasting increased revenues and, to a lesser degree, increased expenses
- a reduced budget for the Taxation Committee based on expected activity
- a decrease in the Third Party Committee budget reflecting pared down activity

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- adjustment to the staff budgets as a result of a reduction of two staff through attrition and other minor adjustments, and
- minor changes to the operations and property budgets

The changes made and incorporated into the 1993 Adjusted Budget are not sufficient to achieve the \$100,000 surplus Management wanted. Nevertheless Management remains committed to a financial plan that would see the Association strive to achieve significant surpluses in each of the coming years to rebuild reserves and reduce the Association's debt as rapidly as practically possible. Future budgets will reflect this objective.

1993 Budget
Changes from Provisional to Adjusted

93/3/19 (RAYPLSS\$.XLS)

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	Expenses		Revenue	
	Increase	Decrease	Increase	Decrease
Fees				
Active & Affil.				\$76,261
Supporting			\$513	
Student				\$12,168
Retired				\$725
Corporate				\$3,786
Licensing Grant			\$5,720	
FDI				\$2,500
Other				
CDF Grant				\$46,000
Property			\$2,000	
Exec. Services				
B. of G.		\$11,000		
Exec.		\$7,000		
Mgmt.		\$7,051		
Pres. Exp.	\$4,000			
FDI		\$27,500		
Prof. Services				
Accred.	\$15,000			
CPR			\$12,000	
DAT		\$50,000	\$10,000	
Dental Spec.		\$7,976		
Education		\$4,000		
Ethics		\$4,053		
PRUC		\$8,971		
Member Services				
Gov't. Rel.		\$6,000		
Com. Steer.	\$13,000			
Ins. & Invest.	\$100,000			
Membership		\$20,000		
Publications	\$25,099		\$50,000	
Taxation		\$2,000		
Third Party		\$10,000		
Admin.				
Exec. Staf		\$997		
Prof. Staff	\$3,422			
Memb. Staff		\$44,555		
Admin. Staff		\$48,307		
Operations		\$400		
Property		\$486		
TOTALS	\$160,521	\$260,296	\$80,233	\$141,440
NET		120		
		\$99,775)		(\$61,207)

CANADIAN DENTAL ASSOCIATION
1993 BUDGET

	1993 Budget (Adjusted)	1993 Budget (Provis'l)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj. Bgt. / 92 Actual
REVENUE						
FEES	\$4,046,134	\$4,135,342	\$3,906,891	\$3,995,321	\$3,697,915	103.6%
OTHER	1,746,227	1,718,227	1,756,127	1,614,100	1,442,512	99.4%
TOTAL REVENUE	\$5,792,361	\$5,853,569	\$5,663,018	\$5,609,421	\$5,140,427	102.3%
EXPENSE						
EXECUTIVE SERVICES	\$591,349	\$639,900	\$552,057	\$641,075	\$607,554	107.1%
PROFESSIONAL SERVICES	385,141	445,141	355,252	378,149	323,307	108.4%
MEMBER SERVICES	1,634,278	1,534,179	1,655,108	1,521,155	1,663,202	98.7%
ADMINISTRATION	3,142,516	3,233,940	2,978,400	3,154,840	2,919,027	105.5%
TOTAL EXPENSE	\$5,753,384	\$5,853,160	\$5,540,818	\$5,695,219	\$5,513,090	103.8%
NET SURPLUS / (DEFICIT)	\$38,977	\$409	\$122,200	(\$85,798)	(\$372,664)	31.9%

CANADIAN DENTAL ASSOCIATION
1993 BUDGET

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	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj.8gt./ 92 Actual
FEES						
Active Fees	\$3,226,290	\$3,479,670	\$3,105,704	\$3,352,365	\$3,097,077	103.9%
Affiliate Fees	334,150	157,031	322,123	151,285	140,373	103.7%
Supporting Fees	14,453	13,940	11,949	13,430	11,847	121.0%
Retired Fees	10,345	11,070	9,875	10,665	10,410	104.8%
Student Fees	45,125	57,293	40,320	51,238	45,833	111.9%
Corporate Fees	127,362	131,148	128,382	131,148	108,305	99.2%
Licensing Body Grants	285,910	280,190	286,670	280,190	280,190	99.7%
FDI Fees	2,500	5,000	1,869	5,000	3,880	133.7%
Total	\$4,046,134	\$4,135,342	\$3,906,891	\$3,995,321	\$3,697,915	103.6%
OTHER						
Accreditation Surveys	\$79,600	\$79,600	\$89,710	\$79,600	\$70,600	88.7%
Consumer Product Recognition	62,000	50,000	38,009	40,000	45,000	163.1%
D A T	310,000	300,000	325,779	300,000	277,755	95.2%
Information Services	207,000	207,000	269,469	200,000	131,418	76.8%
Library Services	147,500	193,500	110,293	193,500	143,487	133.7%
Conferences & Seminars	62,000	62,000	61,507	55,000	63,918	100.8%
Journal	716,000	666,000	715,050	640,000	604,413	100.1%
Property	81,127	79,127	63,265	25,000	30,127	128.2%
Interest	30,000	30,000	35,986	30,000	15,969	83.4%
Other	51,000	51,000	47,057	51,000	59,824	108.4%
Total	\$1,746,227	\$1,718,227	\$1,756,127	\$1,614,100	\$1,442,512	99.4%

CANADIAN DENTAL ASSOCIATION
1993 BUDGET

93/3/19 (BUDGET93.XLS)

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	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj. Bgt. / 92 Actual
EXECUTIVE SERVICES						
Board of Governors	\$135,309	\$146,309	\$133,797	\$148,947	\$141,474	101.1%
Executive Council	112,065	119,065	89,021	106,307	108,227	125.9%
Management Committee	167,747	174,798	170,747	170,643	166,382	98.2%
President's Expenses	72,855	68,855	77,312	72,600	79,051	94.2%
Constitution & By-Laws	1,500	1,500	1,198	1,878	1,315	125.2%
F.D.I.	28,288	55,788	45,140	53,250	64,594	62.7%
Intercompany Relations	23,000	23,000	20,701	22,400	26,954	111.1%
Nominations	15,585	15,585	14,141	15,050	19,557	110.2%
New Projects	35,000	35,000	0	50,000	0	
Total	\$591,349	\$639,900	\$552,057	\$641,075	\$607,554	107.1%

PROFESSIONAL SERVICES

Accreditation	\$150,900	\$135,900	\$143,186	\$132,500	\$92,566	105.4%
Consumer Product Recognition	16,167	16,167	12,408	12,500	9,904	130.3%
DAT	159,050	209,050	137,073	150,225	140,438	116.0%
Dental Mat. & Devices	9,739	9,739	6,841	8,700	8,458	142.4%
Dental Specialties	0	7,976	8,516	7,500	6,631	0.0%
Education	30,807	34,807	16,809	32,500	27,465	183.3%
Ethics	2,000	6,053	4,258	7,344	5,595	47.0%
Commun. & Institution	16,478	16,478	26,139	14,380	20,169	63.0%
PRUC	0	8,971	22	12,500	12,081	0.0%
Total	\$385,141	\$445,141	\$355,252	\$378,149	\$323,307	108.4%

CANADIAN DENTAL ASSOCIATION
1993 BUDGET

93/3/19 (BUDGET93.XLS)

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	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj. Bgt./ 92 Actual
MEMBER SERVICES						
Government Relations	\$6,072	\$12,072	\$5,727	\$10,000	\$7,309	106.0%
Com. Steering	361,500	348,500	438,852	291,360	323,865	82.4%
Insurance & Investment	103,000	3,000	145,122	103,000	72,128	71.0%
Library	54,946	54,946	41,803	43,850	48,168	131.4%
Membership	160,000	180,000	126,100	160,000	187,820	126.9%
Publications	818,500	793,401	772,003	774,050	909,200	106.0%
Student Affairs	94,193	94,193	99,313	91,895	86,783	94.8%
Taxation Committee	6,872	8,872	3,532	10,000	3,635	194.5%
Third Party Plans	29,195	39,195	22,654	37,000	24,294	128.9%
Total	\$1,634,278	\$1,534,179	\$1,655,108	\$1,521,155	\$1,663,202	98.7%
ADMINISTRATION						
Exec. Services Staff	\$445,148	\$446,145	\$422,458	\$427,255	\$429,048	105.4%
Prof. Services Staff	427,732	424,310	446,998	443,365	439,540	95.7%
Hemb. Services Staff	675,465	720,020	640,939	690,600	657,046	105.4%
Admin. Services Staff	448,137	496,445	437,338	475,600	443,805	102.5%
Operations	564,900	565,300	505,870	551,200	537,851	111.7%
Property	581,234	581,720	524,796	566,820	411,736	110.8%
Total	\$3,142,616	\$3,233,940	\$2,978,400	\$3,154,840	\$2,919,027	105.5%

CANADIAN DENTAL ASSOCIATION

1993 BUDGET

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	1993 Budget (Adjusted)	1993 Budget (Provis'l)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj.Bgt./ 92 Actual
FEES						
Active Fees - Newfoundland	\$56,580	\$56,170	54,510	\$54,115	\$50,005	103.8%
Active Fees - P.E.I.	18,450	18,450	17,775	17,775	16,425	103.8%
Active Fees - Nova Scotia	172,610	169,330	166,295	163,135	150,745	103.8%
Active Fees - N.B.	92,250	90,200	88,648	86,900	80,300	104.1%
Active Fees - Quebec	231,650	390,730	223,590	376,435	348,022	103.6%
Active Fees - Ontario	958,170	1,081,580	914,027	1,042,010	962,152	104.6%
Active Fees - Manitoba	203,770	200,900	195,723	193,550	178,850	104.1%
Active Fees - Saskatchewan	136,120	136,530	130,183	131,535	121,590	104.6%
Active Fees - Alberta	550,220	535,460	529,893	515,870	476,690	103.8%
Active Fees - B.C.	806,470	800,320	785,063	771,040	712,298	102.7%
Affiliate Fees - Newfoundland	0	0	0	0	0	
Affiliate Fees - P.E.I.	0	0	0	0	0	
Affiliate Fees - Nova Scotia	0	0	0	0	0	
Affiliate Fees - N.B.	0	0	0	0	0	
Affiliate Fees - Quebec	207,460	126,280	294,473	121,660	112,450	70.5%
Affiliate Fees - Ontario	118,490	18,040	19,750	17,380	15,695	599.9%
Affiliate Fees - Manitoba	0	0	0	0	0	
Affiliate Fees - Saskatchewan	0	0	0	0	0	
Affiliate Fees - Alberta	0	0	0	0	0	
Affiliate Fees - B.C.	0	0	0	0	0	
Affiliate Fees - Other	8,200	12,711	7,900	12,245	12,228	103.8%
Supporting Fees - Newfoundland	0	0	0	0	0	
Supporting Fees - P.E.I.	0	0	0	0	0	
Supporting Fees - Nova Scotia	0	0	0	0	182	
Supporting Fees - N.B.	0	0	0	0	0	
Supporting Fees - Quebec	718	616	691	593	1,460	103.8%
Supporting Fees - Ontario	5,945	5,124	5,728	4,937	3,650	103.8%
Supporting Fees - Manitoba	0	206	0	198	183	
Supporting Fees - Saskatchewan	0	1,026	0	988	0	
Supporting Fees - Alberta	0	204	0	197	0	
Supporting Fees - B.C.	410	0	395	0	532	103.8%
Supporting Fees - Other	7,380	6,764	5,135	6,517	5,840	143.7%
Retired Fees - Newfoundland	205	103	198	99	271	103.8%
Retired Fees - P.E.I.	103	103	99	99	183	103.8%
Retired Fees - Nova Scotia	308	103	296	99	274	103.8%
Retired Fees - N.B.	0	206	-91	198	274	0.0%
Retired Fees - Quebec	2,563	1,947	2,469	1,876	2,555	103.8%
Retired Fees - Ontario	4,818	3,896	4,641	3,753	4,114	103.8%
Retired Fees - Manitoba	308	103	296	99	274	103.8%
Retired Fees - Saskatchewan	205	0	198	0	183	103.8%
Retired Fees - Alberta	615	103	593	99	730	103.8%
Retired Fees - B.C.	923	820	889	790	1,278	103.8%
Retired Fees - Other	300	3,688	289	3,553	274	103.8%

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1993 BUDGET

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	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj. Bgt. / 92 Actual
Student Fees - Newfoundland	0	0	50	0	0	0.0%
Student Fees - P.E.I.	0	0	75	0	0	0.0%
Student Fees - Nova Scotia	3,225	4,227	2,506	3,780	2,920	128.7%
Student Fees - N.B.	25	0	22	0	0	113.6%
Student Fees - Quebec	15,500	21,163	13,988	18,926	14,625	110.8%
Student Fees - Ontario	10,425	12,471	12,311	11,153	10,929	84.7%
Student Fees - Manitoba	2,450	5,774	1,855	5,164	3,990	132.1%
Student Fees - Saskatchewan	2,525	3,177	2,019	2,841	2,195	125.1%
Student Fees - Alberta	4,000	4,895	4,022	4,378	7,321	99.5%
Student Fees - B.C.	3,850	5,063	2,741	4,528	3,491	140.5%
Student Fees - Other	3,125	523	731	468	362	427.5%
Corporate Fees - Newfoundland	1,728	1,644	1,728	1,644	1,460	100.0%
Corporate Fees - P.E.I.	552	612	552	612	480	100.0%
Corporate Fees - Nova Scotia	5,088	5,868	5,088	5,868	4,180	100.0%
Corporate Fees - N.B.	2,940	3,360	2,940	3,360	2,390	100.0%
Corporate Fees - Quebec	18,492	16,068	18,492	16,068	14,580	100.0%
Corporate Fees - Ontario	45,000	53,856	45,564	53,856	41,440	98.8%
Corporate Fees - Manitoba	6,114	5,844	6,114	5,844	5,060	100.0%
Corporate Fees - Saskatchewan	4,380	4,428	4,416	4,428	3,615	99.2%
Corporate Fees - Alberta	17,136	16,176	17,184	16,176	13,950	99.7%
Corporate Fees - B.C.	25,932	23,292	26,304	23,292	21,150	98.6%
Licensing Body Grant - Newfoundland	2,860	2,920	2,860	2,920	2,920	100.0%
Licensing Body Grant - P.E.I.	940	980	940	980	980	100.0%
Licensing Body Grant - Nova Scotia	8,480	8,360	8,480	8,360	8,360	100.0%
Licensing Body Grant - N.B.	4,900	4,780	4,900	4,780	4,780	100.0%
Licensing Body Grant - Quebec	61,920	61,600	61,920	61,600	61,600	100.0%
Licensing Body Grant - Ontario	117,540	114,000	117,540	114,000	114,000	100.0%
Licensing Body Grant - Manitoba	10,190	10,120	10,190	10,120	10,120	100.0%
Licensing Body Grant - Saskatchewan	7,300	7,230	7,360	7,230	7,230	99.2%
Licensing Body Grant - Alberta	28,560	27,900	28,640	27,900	27,900	99.7%
Licensing Body Grant - B.C.	43,220	42,300	43,840	42,300	42,300	98.6%
FDI Fees (Receipts less payments)	2,500	5,000	1,869	5,000	3,880	133.7%
Total	\$4,046,134	\$4,135,342	\$3,906,891	\$3,995,321	\$3,697,915	103.6%

CANADIAN DENTAL ASSOCIATION

1993 BUDGET

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	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj.Bgt./ 92 Actual
OTHER						
Accreditation - Colleges	\$23,500	\$23,500	\$25,360	\$23,500	\$37,000	92.7%
Accreditation - Universities	15,600	15,600	15,600	15,600	15,600	100.0%
Accreditation - Hospitals	4,500	4,500	12,750	4,500	0	35.3%
Accreditation - NDEB Grant	36,000	36,000	36,000	36,000	18,000	100.0%
Consumer Product Recognition - Fees	62,000	50,000	38,009	40,000	45,000	163.1%
D A T - Application Fees	275,000	275,000	259,664	275,000	248,996	105.9%
D A T - Material Sales	35,000	25,000	66,115	25,000	28,759	52.9%
Info. Services - Merchandise Sales	207,000	207,000	269,469	200,000	131,418	76.8%
Library Services - CDF Grant	127,500	177,500	95,800	179,000	129,325	133.1%
Library Services - Charges	20,000	16,000	14,493	14,500	14,162	138.0%
Conf. & Sem. - Teach. - CFDE Grant	11,000	11,000	8,000	10,000	11,000	137.5%
Conf. & Sem. - Stud. - CFDE Grant	11,000	11,000	11,000	10,000	12,850	100.0%
Conf. & Sem. - Annual Conv. (net)	40,000	40,000	40,000	35,000	35,000	100.0%
Conf. & Sem. - Taxation (net)	0	0	4,827	0	287	0.0%
Conf. & Sem. - Other (net)	0	0	-2,319	0	4,782	0.0%
Journal - Commercial Advertising	631,000	619,000	631,769	596,000	570,102	99.9%
Journal - Classified Advertising	60,000	22,000	59,608	22,000	14,380	100.7%
Journal - Subscriptions Sales	25,000	23,000	23,633	22,000	18,602	105.8%
Journal - Reprints Sales	0	2,000	40	0	1,130	0.0%
Property - Rental - O.D.S.	3,871	3,871	3,871	3,750	3,871	100.0%
Property - Rental - Wayne Thomas	4,680	4,680	4,680	2,850	4,680	100.0%
Property - Rental - F.M.W.	5,121	5,121	5,121	3,000	5,121	100.0%
Property - Rental - ACFD	7,056	7,056	7,056	7,000	7,056	100.0%
Property - Rental - CFDE	4,800	4,800	4,800	4,800	4,800	100.0%
Property - Rental - CMA	51,000	50,000	33,333	0	1,000	153.0%
Property - Rental - Parking	3,600	3,600	3,660	3,600	3,600	98.4%
Property - Rental - Escalations	1,000	0	744	0	0	134.3%
Interest - Term Deposits	0	0	21,182	0	0	0.0%
Interest - Current Account	30,000	30,000	14,804	30,000	15,969	202.6%
Other - Royalties	25,000	25,000	14,892	25,000	21,001	167.9%
Other - Foreign Exchange	1,000	1,000	1,409	1,000	2,971	71.0%
Other - Miscellaneous	25,000	25,000	30,757	25,000	35,852	81.3%
Total	\$1,746,227	\$1,718,227	\$1,756,127	\$1,614,100	\$1,462,512	99.4%

CANADIAN DENTAL ASSOCIATION

1993 BUDGET

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	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj. Bgt. / 92 Actual
EXECUTIVE SERVICES						
Board of Governors/Travel	\$31,800	\$31,800	\$29,742	\$37,100	\$31,855	106.9%
Board Of Governors/Accommodation	28,980	28,980	30,994	30,960	30,394	93.5%
Board of Governors/PD	33,579	40,579	33,431	38,787	34,035	100.4%
Board Of Governors/Other	40,950	44,850	39,630	42,100	45,190	103.3%
Executive Council/Travel	19,600	19,600	13,737	18,200	12,836	142.7%
Executive Council/Accommodation	20,815	20,815	19,109	15,587	25,508	108.9%
Executive Council/PD	54,655	54,655	40,062	45,000	34,506	136.4%
Executive Council/Other	6,500	6,500	9,675	7,500	8,727	67.2%
Executive Council Expense/Travel	1,000	3,000	116	3,000	2,160	863.6%
Executive Council Expense/Accommodation	5,520	5,520	1,149	5,520	6,706	480.2%
Executive Council Expense/PD	2,975	2,975	858	5,500	12,354	346.7%
Executive Council Expense/Other	1,000	6,000	4,315	6,000	5,430	23.2%
Management Committee/Travel	5,000	5,000	843	4,000	5,051	592.8%
Management Committee/Accommodation	6,140	6,140	2,508	4,000	9,650	244.8%
Management Committee/PD	16,207	16,207	16,400	12,960	14,184	98.8%
Management Committee/Other	2,000	2,000	1,515	3,500	982	132.0%
Management Committee/Honoraria	92,840	94,891	91,243	91,243	87,735	101.8%
Management Committee Expense/Travel	5,000	6,000	7,269	7,000	4,752	68.8%
Management Committee Expense/Accommodation	4,000	4,000	4,958	5,000	4,066	80.7%
Management Committee Expense/PD	13,060	17,060	21,115	19,440	16,489	61.9%
Management Committee Expense/Other	23,500	23,500	24,895	23,500	23,475	94.4%
President's Expenses/Travel	17,000	13,000	20,760	16,000	14,982	81.9%
President's Expenses/Accommodation	9,000	9,000	5,974	9,000	6,199	150.6%
President's Expenses/PD	29,855	29,855	31,813	29,600	34,188	93.8%
President's Expenses/Other	2,000	2,000	2,493	2,000	1,384	80.2%
President's Expenses/Installation	15,000	15,000	16,271	16,000	22,298	92.2%
Constitution & By-Laws/Travel	0	0	0	0	0	
Constitution & By-Laws/Accommodation	0	0	0	1,000	0	
Constitution & By-Laws/PD	0	0	0	378	0	
Constitution & By-Laws/Other	1,500	1,500	1,198	500	1,315	125.2%
F.D.I. - Congress/Travel	3,188	13,188	7,494	10,150	38,125	42.5%
F.D.I. - Congress/Accommodation	1,500	16,500	9,612	15,500	2,097	15.6%
F.D.I. - Congress/Other	500	500	2,306	2,000	1,815	21.7%
F.D.I. - Corporate Fee	22,100	22,100	25,711	22,100	21,192	86.0%
F.D.I. - Administration	1,000	3,500	16	3,500	1,366	6101.3%
Intercompany Relations/Travel	11,500	11,500	10,879	11,500	14,305	105.7%
Intercompany Relations/Accommodation	9,500	9,500	9,059	10,400	10,113	104.9%
Intercompany Relations/Other	2,000	2,000	764	500	2,536	261.8%
Nominations/Travel	5,900	5,900	4,722	2,400	6,866	124.9%
Nominations/Accommodation	2,920	2,920	2,331	1,840	2,192	125.3%
Nominations/PD	853	853	0	810	788	
Nominations/Other	1,000	1,000	7,088	500	9,711	14.1%
Nominations/Awards	4,912	4,912	0	9,500	0	
New Projects/Travel	5,000	5,000	0	10,000	0	
New Projects/Accommodation	5,000	5,000	0	10,000	0	
New Projects/PD	5,000	5,000	0	10,000	0	
New Projects/Other	20,000	20,000	0	20,000	0	

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Total	\$591,349	\$639,900	\$552,057	\$641,075	\$607,554	107.1%
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	1993 Budget (Adjusted)	1993 Budget (Provis'l)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj. Bgt. / 92 Actual
PROFESSIONAL SERVICES						
Accreditation/Travel	\$16,000	\$16,000	\$18,886	\$11,650	\$15,926	84.7%
Accreditation/Accommodation	10,000	10,000	9,605	9,825	10,376	104.1%
Accreditation/PD	7,000	7,000	378	10,080	910	1851.9%
Accreditation/Other	16,900	1,900	11,029	2,500	9,003	153.2%
Accreditation/University Surveys	40,000	40,000	52,492	52,521	6,736	76.2%
Accreditation/College Surveys	50,000	50,000	30,743	32,968	43,697	162.6%
Accreditation/Hospital Surveys	11,000	11,000	20,053	12,956	5,918	54.9%
Consumer Product Recognition/Travel	8,500	8,500	6,112	4,700	5,018	139.1%
Consumer Product Recognition/Accommodati	4,000	4,000	1,818	2,700	1,202	220.0%
Consumer Product Recognition/PD	3,000	3,000	3,136	4,600	2,742	95.7%
Consumer Product Recognition/Other	667	667	1,342	500	942	49.7%
DAT/Travel	19,750	19,750	15,152	10,500	8,934	130.4%
DAT/Accommodation	20,000	20,000	7,675	7,875	5,345	260.6%
DAT/PD	2,000	2,000	4,697	1,880	3,071	42.6%
DAT/Other	2,500	2,500	6,035	2,500	368	41.4%
DAT/Test Program	114,800	164,800	103,515	127,470	122,721	110.9%
Dental Mat. & Devices/Travel	3,500	3,500	3,767	3,850	4,447	92.9%
Dental Mat. & Devices/Accommodation	4,500	4,500	1,416	2,700	2,221	317.8%
Dental Mat. & Devices/PD	1,000	1,000	950	1,400	700	105.3%
Dental Mat. & Devices/Other	739	739	708	750	1,090	104.4%
Dental Specialties/Travel	0	4,000	5,552	3,100	3,665	0.0%
Dental Specialties/Accommodation	0	1,500	1,156	2,000	1,233	0.0%
Dental Specialties/PD	0	1,976	1,235	1,900	1,075	0.0%
Dental Specialties/Other	0	500	571	500	659	0.0%
Education/Travel	4,500	6,500	7,245	6,785	8,090	62.1%
Education/Accommodation	6,500	8,500	1,505	7,075	3,334	431.9%
Education/PD	2,000	2,000	950	2,640	1,100	210.5%
Education/Other	2,000	2,000	1,289	2,500	1,337	155.1%
Education/Teaching Conference	15,807	15,807	5,819	13,500	13,603	271.6%
Ethics/Travel	0	2,750	0	3,300	3,531	
Ethics/Accommodation	0	1,315	0	2,400	477	
Ethics/PD	0	988	0	1,144	550	
Ethics/Other	2,000	1,000	4,258	500	1,038	47.0%
Commun. & Institution/Travel	7,000	7,000	8,392	3,880	8,506	83.4%
Commun. & Institution/Accommodation	8,000	8,000	5,234	4,200	4,986	152.9%
Commun. & Institution/PD	1,000	1,000	5,613	4,300	2,700	17.8%
Commun. & Institution/Other	478	478	6,901	2,000	3,977	6.9%
PRUC/Travel	0	3,500	0	4,530	6,919	
PRUC/Accommodation	0	2,500	0	3,330	3,186	
PRUC/PD	0	2,471	0	2,140	1,646	
PRUC/Other	0	500	22	2,500	331	0.0%
Total	\$385,141	\$445,141	\$355,252	\$378,149	\$323,307	108.4%

CANADIAN DENTAL ASSOCIATION
1993 BUDGET

93/3/19 (BUDGET93.XLS)

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	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj. Bgt./ 92 Actual
MEMBER SERVICES						
Government Relations/Travel	\$0	\$0	\$17	\$600	833	0.0%
Government Relations/Accommodation	0	0	890	500	384	0.0%
Government Relations/PD	1,706	1,706	0	1,720	0	
Government Relations/Other	500	6,500	4,817	3,000	5,778	10.4%
Ad Hoc Com. on MSB/Travel	1,600	1,600	0	1,600	291	
Ad Hoc Com. on MSB/Accommodation	460	460	0	460	0	
Ad Hoc Com. on MSB/PD	1,706	1,706	0	1,620	0	
Ad Hoc Com. on MSB/Other	100	100	3	500	23	3048.8%
Com. Steering/Travel	5,100	5,100	2,761	4,000	7,160	184.7%
Com. Steering/Accommodation	5,100	5,100	995	4,000	1,556	512.4%
Com. Steering/PD	10,250	10,250	4,624	10,000	11,923	221.7%
Com. Steering/Other	2,050	2,050	3,311	2,000	12,477	61.8%
Com. Steering/DHM	3,375	15,375	17,248	15,000	4,207	19.6%
Com. Steering/DAP	80,000	80,000	85,357	80,000	129,695	93.7%
Com. Steering/DAPS	0	0	23,987	0	(14,543)	0.0%
Com. Steering/Merchandise	205,000	180,000	270,526	151,360	140,814	75.8%
Com. Steering/Services	50,625	50,625	30,043	25,000	30,576	168.5%
Insurance & Investment/Travel	0	0	4,322	0	932	0.0%
Insurance & Investment/Accommodation	0	0	1,236	0	124	0.0%
Insurance & Investment/PD	0	0	1,640	0	0	0.0%
Insurance & Investment/Other	103,000	3,000	137,924	103,000	71,072	74.7%
Library/Services	54,946	54,946	41,803	43,850	48,168	131.4%
Membership/Travel	4,100	4,100	2,884	4,000	2,175	142.2%
Membership/Accommodation	4,100	4,100	1,471	4,000	415	278.6%
Membership/PD	3,485	3,485	1,716	3,400	1,375	203.1%
Membership/Other	5,125	5,125	704	5,000	60	728.3%
Membership/Promotion	143,190	163,190	119,327	143,600	183,795	120.0%
Publications/Newsletter	102,500	102,500	89,472	100,000	75,454	114.6%
Publications/Annual Report & Dir.	0	0	0	0	0	
Publications/Journal Production	510,000	537,151	483,369	524,050	664,297	105.5%
Publications/Journal Sales	206,000	153,750	199,162	150,000	169,448	103.4%
Student Affairs/Travel	7,570	7,570	2,743	7,385	7,751	276.0%
Student Affairs/Accommodation	7,137	7,137	1,858	6,963	3,355	384.1%
Student Affairs/PD	1,638	1,638	2,811	1,598	1,189	58.3%
Student Affairs/Other	993	993	185	969	130	535.4%
Student Affairs/Promotion	64,555	64,555	79,002	62,980	58,241	81.7%
Student Affairs/Student Conf.	12,300	12,300	12,713	12,000	16,118	96.8%
Taxation Committee/Travel	3,000	3,000	1,578	4,000	885	190.1%
Taxation Committee/Accommodation	800	800	218	1,800	252	366.4%
Taxation Committee/PD	1,572	1,572	977	3,024	728	160.9%
Taxation Committee/Other	1,500	3,500	759	1,376	1,771	197.8%
Third Party Plans/Travel	10,695	14,695	7,926	12,500	7,440	134.9%
Third Party Plans/Accommodation	8,500	12,500	6,822	12,500	7,078	124.6%
Third Party Plans/PD	4,000	5,000	5,271	5,000	4,973	75.9%
Third Party Plans/Other	4,000	5,000	2,618	5,000	2,131	152.8%
Third Party Plans/P I P (Net)	2,000	2,000	17	2,000	2,671	11976.0%
130						
Total	\$1,634,278	\$1,534,179	\$1,655,108	\$1,521,155	1,663,203	98.7%

CANADIAN DENTAL ASSOCIATION
1993 BUDGET

93/3/19 (BUDGET93.XLS)

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1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj. Bgt./ 92 Actual
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ADMINISTRATION

Executive Staff/Travel	\$11,500	\$11,500	\$11,405	\$11,000	\$13,986	100.8%
Executive Staff/Accommodation	11,500	11,500	5,901	11,000	7,024	194.9%
Executive Staff/Other	9,500	9,500	7,795	9,000	10,112	121.9%
Executive Staff/Payroll	336,189	336,648	319,997	323,700	332,040	105.1%
Executive Staff/Temporary	2,500	2,500	0	2,500	183	
Executive Staff/Benefits	69,959	67,497	76,922	63,555	62,368	90.9%
Executive Staff/Training	2,000	3,000	383	2,500	2,693	522.8%
Executive Staff/Advertising & Fees	0	2,000	0	2,000	0	
Executive Staff/Miscellaneous	2,000	2,000	56	2,000	641	3590.7%
Prof. Services Staff/Travel	10,500	10,500	8,992	10,000	9,882	116.8%
Prof. Services Staff/Accommodation	8,500	8,500	6,161	8,000	9,261	138.0%
Prof. Services Staff/Other	5,500	5,500	6,257	5,000	8,140	87.9%
Prof. Services Staff/Payroll	330,779	331,900	356,342	355,100	355,428	92.6%
Prof. Services Staff/Temporary	2,500	2,500	454	2,500	259	551.3%
Prof. Services Staff/Benefits	65,953	58,410	57,266	56,285	46,031	115.2%
Prof. Services Staff/Training	2,000	3,000	1,210	2,500	954	165.3%
Prof. Services Staff/Advertising & Fees	0	2,000	0	2,000	4,200	
Prof. Services Staff/Miscellaneous	2,000	2,000	10,317	2,000	5,386	19.4%
Member Services Staff/Travel	9,500	9,500	5,528	9,000	8,668	171.9%
Member Services Staff/Accommodation	7,500	7,500	2,259	7,000	5,502	332.0%
Member Services Staff/Other	6,500	6,500	3,163	6,000	5,907	205.5%
Member Services Staff/Payroll	542,216	574,800	516,540	552,700	521,748	105.0%
Member Services Staff/Temporary	22,500	22,500	10,874	21,000	20,287	206.9%
Member Services Staff/Benefits	79,749	86,220	82,025	82,900	75,343	97.2%
Member Services Staff/Training	3,000	5,000	1,115	4,000	2,076	268.9%
Member Services Staff/Advertising & Fees	2,500	6,000	2,189	6,000	2,902	114.2%
Member Services Staff/Miscellaneous	2,000	2,000	17,245	2,000	14,613	11.6%
Admin. Staff/Travel	3,500	3,500	2,176	3,500	2,955	160.9%
Admin. Staff/Accommodation	3,000	3,000	2,391	2,500	2,707	125.5%
Admin. Staff/Other	3,000	3,000	1,963	2,500	3,778	151.3%
Admin. Staff/Payroll	365,839	406,300	359,872	390,600	368,164	101.7%
Admin. Staff/Temporary	4,000	4,000	2,449	4,000	2,591	163.4%
Admin. Staff/Benefits	63,798	68,145	66,280	64,500	63,308	96.3%
Admin. Staff/Training	3,000	4,500	2,192	4,000	121	136.8%
Admin. Staff/Advertising & Fees	0	2,000	0	2,000	0	
Admin. Staff/Miscellaneous	2,000	2,000	-5	2,000	182	-36630.0%

CANADIAN DENTAL ASSOCIATION
1993 BUDGET

93/3/19 (BUDGET93.XLS)

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	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)	1991 Actual	93 Adj. Bgt. / 92 Actual
Operations/Travel	500	500	23	500	163	2198.8%
Operations/Accommodation	500	500	46	500	622	1097.9%
Operations/Facility R&C	5,800	6,000	4,450	5,500	5,341	130.3%
Operations/Printing	1,000	1,100	420	1,000	802	238.3%
Operations/Photocopying	1,800	1,600	1,656	1,500	1,584	-108.7%
Operations/Translation	500	500	0	500	170	
Operations/Photography	500	500	17	0	-405	2995.8%
Operations/Postage	2,000	1,800	1,147	1,500	4,924	174.4%
Operations/Shipping And Delivery	7,000	5,000	10,367	5,000	7,848	67.5%
Operations/Electronic Mail & Fax	6,500	10,000	376	10,000	5,097	1730.2%
Operations/Legal & Consulting	2,000	2,000	1,078	2,000	7,063	185.5%
Operations/Equip. Purchase & Rental	89,000	99,000	34,957	99,000	60,289	254.6%
Operations/Equip. Maintenance	12,000	9,000	14,595	8,500	12,581	82.2%
Operations/Office Supplies	16,000	17,500	13,205	17,000	15,101	121.2%
Operations/Stationary	39,000	40,000	40,867	38,000	32,408	95.4%
Operations/Dues Fees & Subs	1,300	1,300	554	1,200	1,100	234.8%
Operations/Software	6,000	8,000	3,151	8,000	3,567	190.4%
Operations/Telephone	121,000	121,000	117,648	115,000	120,195	102.8%
Operations/Admin. Charges	16,500	16,000	16,360	15,000	15,813	100.9%
Operations/G.S.T.	140,000	135,000	143,832	135,000	145,817	97.3%
Operations/Audit And Financial	18,000	18,000	23,800	17,000	14,525	75.6%
Operations/Equip. Dep'n.	52,000	52,000	51,526	52,000	51,526	100.9%
Operations/Insurance	16,000	16,000	13,208	15,000	13,097	121.1%
Operations/Miscellaneous	10,000	3,000	12,591	2,500	18,624	79.4%
Property/Rent	15,000	16,000	11,804	16,000	12,046	127.1%
Property/Other	4,200	1,200	1463.2	1000	-256	287.0%
Property/Legal & Consulting	5,000	2,000	5,611	2,000	4,655	89.1%
Property/Utilities	60,000	60,000	72,706	58,500	58,831	82.5%
Property/HVAC	18,000	18,000	22,548	17,000	16,224	79.8%
Property/Cleaning	24,000	24,000	23,453	22,500	22,177	102.3%
Property/Security & Fire Inspection	3,200	3,200	5,848	2,500	2,931	54.7%
Property/Bldg. Main. & Repairs	12,000	12,000	17,725	8,000	7,416	67.7%
Property/Grounds Maintenance	12,000	12,000	9,457	10,000	10,454	126.9%
Property/Dep'n Expense	179,200	179,200	162,063	179,200	170,634	110.6%
Property/Mortgage	151,134	171,620	112,554	171,620	32,334	134.3%
Property/Insurance	7,500	7,500	6,169	6,000	5,211	121.6%
Property/Realty Tax	89,000	74,000	73,398	71,500	68,604	121.3%
Property/Miscellaneous	1,000	1,000	0	1,000	474	
Total	\$3,142,616	\$3,233,940	\$2,978,400	\$3,154,840	\$2,919,027	105.5%

CDANet
Projected Income Statement
for the period ending Dec. 31, 1993

	1993 Budget (Adjusted)	1993 Budget (Provis'1)	1992 Actual (Unaudited)	1992 Budget (Adjusted)
REVENUE				
Royalties	\$150,000	\$150,000	\$37,853	\$25,000
less distribution to participants	<u>(\$150,000)</u>	<u>(\$150,000)</u>	<u>(\$37,853)</u>	<u>(\$25,000)</u>
Net Royalties	\$0	\$0	\$0	\$0
Interest	\$500	\$500	\$298	\$0
Miscellaneous	\$5,000	\$5,000	\$13,627	\$0
Total	<u>\$5,500</u>	<u>\$5,500</u>	<u>\$13,925</u>	<u>\$0</u>
EXPENDITURE				
Claims Processing	\$36,000	\$60,000	\$77,666	\$95,000
Value Added	\$30,000	\$42,000	\$45,170	\$65,000
Econometric	\$0	\$0	\$0	\$0
Committee	\$14,000	\$30,000	\$21,059	\$20,000
Total	<u>\$80,000</u>	<u>\$132,000</u>	<u>\$143,895</u>	<u>\$180,000</u>
Net Surplus/(Deficit)	<u>(\$74,500)</u>	<u>(\$126,700)</u>	<u>(\$129,970)</u>	<u>(\$180,000)</u>

CDA Convention Department
Projected Income Statement
for the period ending Dec. 31, 1993

	1993 Budget	1992 Actual (Unaudited)	1992 Budget
REVENUE			
Registration Fees	\$225,000	\$254,579	\$216,000
Exhibits	\$452,000	\$285,845	\$275,000
Social Programs	\$13,000	\$44,093	\$19,000
Miscellaneous	\$50,000	\$66,311	\$50,000
Total	\$740,000	\$650,828	\$560,000
EXPENDITURE			
Committee	\$28,500	\$9,792	\$12,000
Promotion	\$121,000	\$99,515	\$65,000
Scientific Sessions	\$118,500	\$103,684	\$90,000
Exhibits	\$62,500	\$15,845	\$40,000
Social Programs	\$55,500	\$94,124	\$58,000
Administration	\$331,300	\$268,056	\$295,000
Total	\$717,300	\$591,013	\$560,000
Net Surplus/(Deficit)	\$22,700	\$59,815	\$0



MEMORANDUM

March 17, 1993

CANADIAN
DENTAL
ASSOCIATION
L'ASSOCIATION
DENTAIRE
CANADIENNE

TO: Jardine Neilson, Executive Director
FROM: Joel Neal, Director of Administration *Joel*
SUBJECT: ANALYSIS OF FINANCIAL RESULTS TO DECEMBER 1992

I have prepared a brief analysis of the third draft of the December 1992 Financial Statements. Please note these statements are still preliminary and subject to change as year end adjusting entries are made. This memo, however, provides an update to my memo of January 20, 1993.

INCOME

Fees

Fees have come in pretty much as projected, approximately \$88,000 below budget compared to a projection of \$96,500 below budget.

Other income

We projected Other Income would be approximately \$170,000 above budget. The current financial statements indicate other income to be \$142,000 above budget, but we have yet to account for the balance of the CDF grant.

Depending on what the final numbers are for the grant, we should at least hit our projection and probably exceed it by about \$40,000. It should also be noted, Journal income exceeded our projection by about \$50,000.

...2

EXPENSES

Executive Services

We projected Executive Services would come in approximately \$70,000 under budget, with \$50,000 of this being the unused new projects budget. Preliminary numbers at the end of the year indicate that the program areas in this department are, together, \$89,000 under budget. There may be additional expenses that have not yet been recorded, but we also have to record adjustments to the FDI account. The result is the division should come in about \$109,000 under budget.

Professional Services

We projected the Professional Services Department program areas would, as a group, come in approximately \$36,000 under budget. The preliminary numbers show a total of \$23,000 under budget. Accreditation expenses, which we thought would be under budget by \$3,000 in fact appear to be \$10,000 over budget.

Membership Services

We projected this division would end the year approximately \$99,000 over budget. However, preliminary results show the numbers are closer to \$134,000 over budget.

The information services area is probably the most susceptible to year end changes. Inventory write-offs and expenses related to on-going projects are somewhat more difficult to predict than expenses related to such things as committee meetings. We projected the area would be \$50,000 over budget but the preliminary statements suggest the area will in fact be closer to \$100,000 over budget. This is mostly due to expenses related to merchandise, in particular the DIS racks which you may recall we had a problem with.

We predicted the Insurance and Investment area would be over budget by \$50,000 and even though the preliminary numbers suggest it is \$42,000 over budget, there may well be additional legal expenses based on work done in December, that are yet to be billed.

...3

Membership is an area where we thought the bulk of the budget would be spent and that we might end the year \$5,000 under budget. The December results show that we are currently \$34,000 under budget. I believe there must be some invoices in the pipe, and while I think we should do better than our original projection, it will probably be more in the vicinity of \$20,000.

The publications area has come in, at least based on preliminary numbers, bang on budget which is a fairly remarkable achievement based on the size of the budget. If there are no year-end adjustments to this figure it demonstrates a rather remarkable turn-around.

All in all, I still feel comfortable projecting the division will probably end the year close to the \$99,000 over budget suggested last month.

Administration

The Administration area as a division was expected to come-in approximately \$130,000 under budget. Preliminary numbers indicate the division is \$176,000 under budget. However, it is likely year end adjustments will reduce this amount. I would expect this division will end up approximately \$140,000-150,000 under budget.

Conclusion

Based on the above, it seems we will achieve our earlier projection of a \$107,000 surplus, at least. We will more likely achieve a surplus of approximately \$200,000-225,000.

I expect the audit to be wrapped up by the end of March and to have statements to you shortly thereafter. A more complete report will follow then.

c.c. Management Committee
Senior Staff

CANADIAN DENTAL ASSOCIATION
CASH FLOW STUDY
as at Dec. 1992

	Variance	1992 Actual (3rd draft)	1992 Budget (Prorated)	1992 Budget (Adjusted)
FEES				
Active	-246,600	3,105,704	3,352,304	3,352,365
Affiliate	170,838	322,123	151,285	151,285
Supporting	-1,481	11,949	13,430	13,430
Student	-10,918	40,320	51,238	51,238
Retired	-790	9,875	10,665	10,665
Corporate	-2,766	128,382	131,148	131,148
Licensing Body	6,480	286,670	280,190	280,190
F.D.I.	-3,131	1,869	5,000	5,000
Total	-88,369	3,906,891	3,995,259	3,995,321
OTHER				
Accred. Surveys	10,110	89,710	79,600	79,600
C.P.R.	-1,991	38,009	40,000	40,000
D.A.T.	25,779	325,779	300,000	300,000
Info. Services	69,469	269,469	200,000	200,000
Library	-83,207	110,293	193,500	193,500
Conf. & Seminars	6,507	61,507	55,000	55,000
Journal	75,050	715,050	640,000	640,000
Property	38,265	63,265	25,000	25,000
Interest	5,987	35,986	29,999	30,000
Other	-3,943	47,057	51,000	51,000
Total	142,028	1,756,127	1,614,099	1,614,100
TOTAL REVENUE	53,659	5,663,018	5,609,358	5,609,421

CANADIAN DENTAL ASSOCIATION
CASH FLOW STUDY
as at Dec. 1992

	Variance	1992 Actual (3rd draft)	1992 Budget (Prorated)	1992 Budget (Adjusted)
EXECUTIVE SERVICES				
Board of Governors	15,150	133,797	148,947	148,947
Executive Council	17,286	89,021	106,307	106,307
Management Committee	-104	170,747	170,643	170,643
President's Expenses	-4,712	77,312	72,600	72,600
Constitution & By-laws	680	1,198	1,878	1,878
F.D.I.	8,110	45,140	53,250	53,250
Intercompany Relations	1,699	20,701	22,400	22,400
Nominations	909	14,141	15,050	15,050
New Projects	50,000	0	50,000	50,000
Total	89,018	552,057	641,075	641,075
PROFESSIONAL SERVICES				
Accreditation	-10,686	143,186	132,500	132,500
Consumer Product Recognition	92	12,408	12,500	12,500
DAT	13,152	137,073	150,225	150,225
Dental Materials & Devices	1,859	6,841	8,700	8,700
Dental Specialties	-1,016	8,516	7,500	7,500
Education	15,691	16,809	32,500	32,500
Ethics	3,086	4,258	7,344	7,344
Community & Institution	-11,759	26,139	14,380	14,380
PRUC	12,478	22	12,500	12,500
Total	22,897	355,252	378,149	378,149

CANADIAN DENTAL ASSOCIATION
CASH FLOW STUDY
as at Dec. 1992

	Variance	1992 Actual (3rd draft)	1992 Budget (Prorated)	1992 Budget (Adjusted)
MEMBER SERVICES				
Government Relations	4,273	5,727	10,000	10,000
Information Services	-145,493	436,861	291,368	291,360
Insurance & Investment	-42,122	145,122	103,000	103,000
Membership	33,897	126,103	160,000	160,000
Publications	56	773,994	774,050	774,050
Library	2,039	41,803	43,842	43,850
Student Affairs	-7,418	99,313	91,895	91,895
Taxation	6,468	3,532	10,000	10,000
Third Party Plans	14,346	22,654	37,000	37,000
Total	-133,954	1,655,108	1,521,155	1,521,155
ADMINISTRATION				
Staff - Executive Services	4,544	422,458	427,002	427,255
Staff - Professional Services	-3,633	446,998	443,365	443,365
Staff - Member Services	49,661	640,939	690,600	690,600
Staff - Administration	38,262	437,338	475,600	475,600
Operations	45,330	505,870	551,200	551,200
Property	42,024	524,796	566,820	566,820
Total	176,187	2,978,400	3,154,587	3,154,840
TOTAL EXPENSES	154,149	5,540,817	5,694,966	5,695,219
SURPLUS/(DEFICIT)	207,808	122,200	-85,607	-85,798

Canadian Dental Association

EXPENSE POLICY

Travel and Accommodation

The following are the travel and accommodation expense policies of the Canadian Dental Association. This document is intended to serve as a reference. Any questions pertaining to the policies or to the coverage of expenses, should be addressed prior to incurring the expense.

ELIGIBILITY

Expenses are reimbursed to:

- CDA Governors
- Chairman of the Board
- Executive Council Members
- Council, Commission and Committee Chairmen
- Council, Commission and Committee Members
- Resource Personnel and/or
- Presidential Appointees

CDA financial responsibility is limited to authorized meeting attendees.

For expenses to be eligible, the meeting must be convened by the President, Executive Director or Council/Commission/Committee Chairmen in the context of their duties and obligations. A notice of meeting issued from CDA headquarters constitutes authorization that a member's travel is on official business.

Per Diems at the rate currently in place are paid to members of Executive Council, Management Committee, the Chairman of the Board, Council, Commission and Committee Chairmen, and Presidential appointees ratified by the Management Committee, for days spent on official CDA business.

Should a claimant be eligible for per diems from another organization while attending a CDA meeting, CDA per diem coverage may not be claimed.

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CLAIMS

General

All expenses claimed must be necessary, reasonable and effective. At all times, attendees are encouraged to exercise prudence in their travel costs. For example, excursion air fares are to be used whenever possible.

Original receipts, not photocopies, must accompany all expense claims, including copies of all charges to CDA corporate credit cards. With regard to corporate credit cards, claimants must identify (using the reverse side of each copy) the meeting attended, and by name, all persons covered by the expense.

When using a charge card to cover a group expense, holders should advise their group of all limitations, including the CDA meal allowance. Claims in excess of the stated allowances will be adjusted before processing.

Claims must be submitted within thirty (30) days of the event. CDA reserves the right to refuse unauthorized claims and to ask for substantiation of claims.

Travel

Members should use the mode of transportation most convenient for their travel. Reimbursement for travel will cover excursion class (seat sale) airfare or economy class airfare where such "seat sales" are not available. **Where excursion airfares are not utilized a brief explanation should accompany the expense claim.** (When advised, members are to use Air Canada Convention Central Ticketing facilities).

Taxi fares, to and from the individual's house or office to the airport as well as taxi fares to and from the hotel or meeting place will be reimbursed upon submission of original receipts.

CDA will cover personal automobile travel at a rate of .30¢ per km to a maximum of airfare to the same location.

Accommodation

Reasonable hotel room charges will be paid. Whenever possible arrangements should be made through the association to utilize corporate rates. Hotel accommodation charges in Ottawa are limited to **\$105.00** per night, plus taxes, which represents CDA's corporate rate at the Westin Hotel.

Expenses may be included from the evening preceding a daytime meeting until the morning following the close of the meeting.

Hotel dockets (guest checks) must accompany all charges for accommodation expenses. Charges for room, parking and meal/beverage expenses that can be included under the total allowance for the meeting period, will be reimbursed. All other charges will be considered personal expenses and will be deducted from the claim.

Guaranteed reservations for accommodation booked through CDA and subsequently not utilized must be honored if not cancelled within declared limits. It is the responsibility of the person for whom the booking was made to ensure such cancellations are made. Any charges received by the Association due to non-cancellations will be billed back to the person for whom the reservation was made, or will be removed from subsequent expense claims.

Meals

Expenses for meals are reimbursable when supported by original receipts to a maximum of \$15.00 for breakfast, **\$20.00** for lunch, and \$40.00 for dinner or **\$75.00** daily. **The meal allowance including GST is \$16.05 for breakfast, \$21.40 for lunch and \$42.80 for dinner.** As noted above, expenses may be included from the evening preceding a daytime meeting until the morning following the close of the meeting. Where the Association sponsors a meal to which the member is invited, no meal expense may be claimed.

Claims for meal allowances exceeding the limits set by CDA will be disallowed. If a claimant makes a claim for a group that collectively exceeds the limit, the coverage will be deducted from the claimant's claim.

Miscellaneous

Miscellaneous expenses (eg. gratuities, phone calls) incurred by travelling on CDA business may be claimed to a maximum of **\$10.00** per day.

CDA Corporate Travel Agency

The CDA has engaged Marlin Travel to handle its corporate travel needs. A system is in place whereby Marlin is informed of each CDA meeting; its representative contacts each individual attending the meeting to offer services in booking travel arrangements. This system significantly increases the likelihood of attaining excursion air fares.

Marlin's toll free number is: 1-800-267-8892.

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Airline

Air Canada is CDA's official airline for 1993. For meeting groups of 10 or more the meeting will be registered with Air Canada Convention Central, reference # CV 930034. The utilization of this reference number will generate credit towards free airline tickets to be used to subsidize CDA travel costs. In addition, through Convention Central, travellers can benefit from savings of up to 65% on the regular Hospitality Class, with minimum guaranteed savings of 15% on the full Hospitality and Executive Class Services. Individuals travelling to the 1993 Annual Dental Meeting should use Air Canada Convention Central, reference # CV 930033.

While travelling on CDA Business you are encouraged to utilize the services of Marlin Travel, however if you wish to maintain your current arrangements for air travel CDA would ask, if you plan to travel with Air Canada, please provide the Air Canada Convention Central reference to your travel agency or Air Canada if booking directly at 1-800-361-7585.

Insurance

Members travelling on CDA business are insured to a limit of \$150,000 against loss of life or dismemberment.

Effective January 1, 1993

COMMITTEE ON STUDENT AFFAIRS

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members: Ms. Mahnaz Fatahzadeh, U. of British Columbia, Chairman
Mr. Marco Chiarot, Dalhousie U., Student Governor
Dr. Deborah Cooper-Lall, Calgary, Past Chairman
Dr. Karim Nanji, Toronto, Past Student Governor
Mr. Gregg Mitton, Dalhousie U., Chairman-Elect
Mr. Kevin Davis, U. of Toronto, Student Governor-Elect
Mr. Robert Armstrong, U. of British Columbia
Mr. Nathan Kern, U. of Alberta
Mr. Jeff Dutka, U. of Saskatchewan
Ms. Stella Loscerbo, U. of Manitoba
Mr. Robert Morin, U. of Western Ontario
Ms. Cristina Iafrancesco, McGill U.
Ms. Caterina Alvaro, U. of Montreal
Ms. Denise Moison, U. Laval

Executive

Liaison: Dr. Ray Wenn, on behalf of Dr. Richard Sandilands

Senior Staff: Ms. Linda Teteruck, Director of Communications

Coordinator: Mrs. Win Mobley

1. Committee Meetings

The Committee has met once since the 1992 Annual Meeting of the Board of Governors, on September 12, 1992, immediately following the Canadian Dental Students' Conference in Ottawa.

ITEMS REQUIRING BOARD ACTION

2. Review of the Structure of the Committee on Student Affairs

A CSA working group met in Calgary during the CDA Convention to discuss the feasibility of restructuring the Committee on Student Affairs. This is being considered as the Committee becomes more involved with new grad issues. The proposed format entails holding the Canadian Dental Students' Conference in the spring, with the newly-elected CDA representatives (second year, third year in Saskatchewan) attending. Orientation activities and presentations from various arms of organized dentistry would be extremely beneficial to these new reps at this point

in time, who would then be conducting the membership campaign in their respective schools in the fall. The second meeting of the year would take place in the fall with the fourth year CDA representatives returning to participate in the activities of the Committee relative to new grad issues.

This format would neither decrease the number of meetings a CDA rep would attend during his/her term, nor increase costs. It would, however, allow the continuity and expertise required to effectively address new grad issues.

The Committee on Student Affairs approved the proposed structure, in principle, with the logistics to be determined by the CDA. A flow chart of the proposed CSA structure is appended for review.

APPENDIX I**RESOLVED:**

- 93.27 **THAT the Committee on Student Affairs be restructured according to the guidelines outlined by the working group in August 1992, as appended.**

ADOPTED**ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION****3. Committee Position Paper - Certification and Licensure**

To consolidate and document the student position on certification and licensure in Canada, a petition was developed in October 1992 and signed by Canadian dental students at all ten dental schools, which reinforced their support of the student position defined in the position paper developed in the Fall of 1991 and presented to the 1992 Interim Board.

The petition was presented to the National Dental Examining Board annual meeting held on November 2 and 3, 1992, by Marco Chiarot, Student Governor.

The position paper on certification and licensure was updated to reflect the latest developments in this area, and the student view. The appended paper was provided to Executive Council at its February meeting.

APPENDIX II

The position paper will form the basis of a requested guest opinion piece in the CDA Journal.

4. Student Membership

Although Executive Council and Board approval was given to the concept of a four (five)-year student membership package last August, it was not possible to implement this package in September 1992, because of the joint nature of the student program in Ontario. The 1992-93 CSA Committee discussed this item in detail at the last meeting and feels that further investigation into the proposed package, with the accompanying lump sum fee for four/five years, should be done to ensure that it will be marketable to the students, or if it will have a potential detrimental effect on student membership. It is expected that the review will be completed shortly and the Committee will comment further at its next meeting.

Student membership for 1992-93 has been maintained at 97%, and the school figures are appended.

APPENDIX III

5. CDA/CFDE Canadian Dental Students' Conference

Members of the Committee resolved to convey their appreciation to the CFDE for generously sponsoring the Students' Conference again in 1992. They feel strongly about the value of the Conference, which provides student representatives with an opportunity to glean first-hand information on organized dentistry. Members remain committed to enhancing the profile of the CFDE at their respective schools whenever possible.

The Committee also felt that holding the 1992 Conference at CDA Headquarters gave them an opportunity to view the CDA facilities while speaking to staff members of the various departments. Members felt the change of venue from a hotel to CDA Headquarters provided them with a feeling of closer affiliation to CDA, and this was welcomed.

Therefore, depending on the outcome of discussions on the proposed new CSA structure, the 1993 CDA/CFDE Canadian Dental Students' Conference has been tentatively scheduled for either June 5 and 6, or September 12 and 13, 1993 in Ottawa.

6. American Student Dental Association (ASDA)

ASDA Vice-President, Ms. Liza Karamardian, attended the 1992 CDA/CFDE Canadian Dental Students' Conference. She spoke to delegates on issues of concern to dental students in the United States, namely licensure, AIDS, post-graduate dental studies and recent changes in health and safety regulations.

7. Committee Elections

Elections were held for the student positions of Student Governor-Elect and CSA Chairman-Elect. Mr. Kevin Davis, University of Toronto and Mr. Gregg Mitton, Dalhousie University were elected to these positions, respectively.

8. CDA Presentations and "Welcomes" at the Dental Schools

The concept of formal time for a CDA speaker to address students has now been realized at the dental schools. CDA speakers' time has been arranged either during classes, and in conjunction with the "Welcome to the Profession" reception, or at a separate suitable time. The timing of this formal CDA speaker presentations will continue to be refined in future years. (It is noted that a speech/slide presentation has been developed for CDA speakers to ensure continuity and a common CDA theme and message.)

The Committee discussed the \$500.00 sponsorship funding received from the CDA for the receptions, and feels that sometime in the near future, this subject will be addressed as it becomes more difficult each year to meet this budget in organizing the event.

9. Closing

On behalf of the Committee on Student Affairs, I would like to extend sincere appreciation to the Canadian Dental Association for providing the opportunity for student participation in organized dentistry. I also would like to thank Dr. Ray Wenn, Mrs. Win Mobley and Ms. Linda Teteruck for their ongoing support and guidance.

Respectfully submitted,

Mahnaz Fatahzadeh (Ms.)
Chairman
Committee on Student Affairs

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Committee on Student Affairs.

THE COMMITTEE ON STUDENT AFFAIRS PROPOSAL FOR A REVISED STRUCTURE

APPENDIX I

PRESENT STRUCTURE

The present structure of the CSA is comprised of 14 representatives, 10 third year CDA representatives elected at their dental schools, 2 fourth year students - the CDA student governor and CSA chairman and 2 new grads - the past student governor and past CSA chairman.

The Committee meets twice yearly, once in the late summer or early fall at the time of the CDA annual meeting (if convenient) and once in the late winter/early spring at the time of the CDA interim board meeting. The fall meeting is held in conjunction with the annual Canadian Dental Student's Conference and the spring meeting is a stand alone one day meeting.

Meetings are held at this time for purposes of cost saving since the student governor, governor elect and chairman also attend the CDA board meetings

Elections are held at the fall CDSC meeting for the student governor-elect and chairman-elect and they continue to serve a three year term on the Committee. The remaining 8 student representatives serve a one year term only.

REASONS FOR CHANGE

The following changes to the CSA will alter the format of CSA meetings but will not change the total number of attendees. Nor will it increase the costs associated with Committee meetings.

Changes are being recommended to address the following concerns:

(1) There is concern on the effectiveness and productivity of the spring meeting of the CSA. This is due in large part to the format of the meeting which is a followup on business from the fall conference.

(2) The CDA is interested in reaching 4th year students/new grads and in marketing its services to this target group. CDA is seeking a more effective way to communicate with this group within the structure of the CSA.

PROPOSED NEW STRUCTURE

Each year, the 10 dental faculties would elect a CDA representative who would attend his/her first CSA meeting in the spring of second year in conjunction with the annual Canadian Dental Students' Conference. The intent of this meeting would be to orient

PROPOSED STRUCTURE - CSA

Spring CSA-CDSC Meeting

Attendees:

- 8 - 2nd year CDA reps
- 2 - 2nd year elected reps - governor-elect, chair-elect
- 2 - 3rd year elected reps - governor and chair
- 2 - 4th year elected reps - past-governor and past-chair

Fall CSA Meeting

Attendees:

- 2 - 3rd year elected reps - governor-elect and chair-elect
- 8 - 4th year reps
- 2 - 4th year elected reps - governor and chair
- 2 - new grads - past-governor and past-chair

Spring CSA-CDSC Meeting

Attendees:

- 8 - 2nd year CDS reps
- 2 - 2nd year elected reps - governor-elect and chair-elect
- 2 - 3rd year elected reps - governor and chair
- 2 - 4th year elected reps - past-governor and past-chair

Fall CSA Meeting

Attendees:

- 2 - 3rd year elected reps - governor-elect and chair-elect
- 8 - 4th year reps
- 2 - 4th year elected reps - governor and chair
- 2 - new grads - past governor and past chair

PROPOSED NEW STRUCTURE - CONT'D

student representatives to the benefits of CDA student membership, inform them about the various arms and roles of organized dentistry and to provide them with the tools they need to begin the fall CDA student membership campaign. Enthusiasm and interest should be high since this will be CDA's first meeting with these students, in a conference format.

At this meeting, elections would be held for the student governor-elect and CSA chairman-elect who would continue to serve a three year term on the CSA.

A one day meeting of the CSA would be held in the fall in late August or September, possibly in conjunction with the CDA annual meeting. Attendees would include the 10 fourth year CSA representatives who had attended their first CSA meeting in year 2. The purpose of this meeting would be to inform senior students about what CDA has to offer new grads and to reinforce the value of CDA membership to full and active practising dentists. Instead of concentrating on student membership, this meeting would focus on the benefits of being a CDA member after graduation and the 4th year reps would be required to communicate this information to their colleagues.

COST, IMPACT AND CONCLUSIONS

The cost of this revised structure should be no more than that currently being spent to finance two full meetings of the CSA in the spring and the fall of each year. The annual students' conference would now be held in the spring in order to prepare CSA reps for the fall membership drive and "welcome" events. CDA reps would have more time to prepare for the fall campaign and the "welcome" events. Their understanding of CDA's requirements would also be enhanced.

It should be noted that continuity would be provided by the governor-elect and chairman-elect, the governor and chairman, and the past governor and past chairman since the CSA representatives attending the spring and fall meetings will change.

A further departure from our current system involves the length of time that the two new graduates - the past-governor and the past-chairman - continue to serve on the Committee. Currently they remain on the committee for one full year after graduation. The new structure would involve them attending the fall meeting only.

THE CDA COMMITTEE ON STUDENT AFFAIRS POSITION PAPER

ON

CERTIFICATION AND LICENSURE IN CANADA: AN UPDATE

The issue of certification and licensure of Canadian dentists has been, and will remain, to be a hotly debated topic. The dental students of Canada are actively observing events as they unfold. This subject was the prime concern of our student body at the September 1992 meeting of the CDA Committee on Student Affairs. It was unanimously felt that the CSA has a responsibility to put forth student concerns on this matter to the Board of Governors of the Canadian Dental Association. It is the goal of this paper to make our views known so that our interests are considered when decisions are made by the CDA, provincial licensing bodies and other groups and organizations on this very important topic.

The impetus for mandatory National Dental Examining Board (NDEB) examination of students graduating from CDA accredited dental schools arose from a decision a three-member committee of the RCDS (Ontario) to accept the Northeast Regional Board (NERB) exam as the standard for American trained Canadian dental students returning to Canada. The NDEB, through an act of parliament in 1952, is the sole body responsible for certification of dentists to the Canadian national standard. With their action, the RCDS altered a process that has been satisfactorily functioning in Canada for many years.

The NDEB symposium on certification and licensure in November of 1992 brought together all the major players involved, namely the CDA, the NDEB and the ten provincial licensing bodies. The students were also represented by Dr. Karim Nanji and me. Although nothing concrete was resolved, some important discussion ensued and all groups represented at the meeting, made their position clear. At this point, the students recognize that there is solidarity among the licensing bodies and that their wish is to have mandatory NDEB examination of all potential graduates from CDA accredited dental faculties. While the format of the exam has not been totally agreed upon, all provincial bodies have agreed to a full NDEB written examination and some form of clinical examination; perhaps the external examiner system. All students must be examined, a random sample will not be accepted.

Canadian dental students strongly oppose mandatory testing for licensure. This is evidenced by 95% of Canadian dental students signing a petition circulated to all Canadian dental schools in opposition to the proposed mandatory examination. Reasons for this are outlined below.

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Firstly, we feel that the process of accreditation is a valid process to ensure the Canadian public is treated by competent dentists. Although the accreditation process does not test the product, we feel there is enough in house testing to warrant that the end product is indeed competent. Who is better able to ascertain this than the members of each respective dental faculty who have worked closely with each student over the course of four long years? Certainly not a one or two-day exam process administered by external sources.

Furthermore, a legal perspective from Mr. Kane at the NDEB symposium in November 1992 reveals that in his opinion accreditation is legally defensible if challenged in a court of law. If, in fact, mandatory testing goes ahead, the accreditation process will be reduced to a cursory check-up visit to ensure that the dental schools have the physical facilities to train dentists. Even this may not be necessary in the long run.

Students are also concerned about how mandatory examination of all dental students will affect the curriculum. Will each faculty lose their identity and teach "to the board exam" or will each school preserve their unique strengths and not become common? This is a question that only time will answer but attention must be given now, so this may be considered as decisions are being made.

Turning to the question of national portability, the students recognize this as a desirable feature. However, we also realize that presently the only province in which a recent graduate cannot attain licensure without writing an exam is Quebec. On the whole, Canadian dental students feel if a student wants to practice dentistry in Quebec, he or she will most likely attain his or her DDS in this province. This compromise seems a very small reward for the great sacrifice of mandatory testing.

The cost of implementing such a system has been estimated at approximately \$2,000.00 per candidate. We are concerned that this cost will be borne solely by the students. Many licensing authorities have already made it clear that, indeed, the students will bear these costs. The dental students of Canada find this hard to accept as most of us are already in debt at the completion of our dental programs, and urge each licensing body to consider increasing their fees to their members to cover this cost. In this way, a small increase over a larger group will save each student a considerable expense. If the licensing bodies are serious about mandatory testing, and feel that it is a necessity, they should be more than willing to go to their members and ask for this small increase in fees.

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In summary, the Canadian dental students wish to state that a mandatory NDEB exam for graduates of Canadian dental schools is redundant and does little to ensure competency. We support the accreditation process as it is and feel it ensures the Canadian public's safety. All parties involved in this decision and the dentists of Canada should recognize mandatory testing for what it really is: "window dressing". The money being spent on this endeavour could be better utilized on other issues of greater benefit to the profession.

Respectfully submitted,

Marco Chiarot
CDA Student Governor

On behalf of the
CDA Committee on Student Affairs

February 1993

1992-93 STUDENT MEMBERSHIP FIGURES**as of January 25, 1993**

<u>SCHOOL</u>	<u>YEAR 1</u>	<u>YEAR 2</u>	<u>YEAR 3</u>	<u>YEAR 4</u>	<u>YEAR 5</u>	<u>TOTAL</u>
B.C.	37/40	37/39	36/38	34/37		144/154
Alberta	32/32	28/28	50/50	50/50		160/160
Dalhousie	32/32	32/33	31/32	32/32		127/129
Manitoba	24/26	25/25	25/25	22/22		96/98
UWO	41/42	40/40	40/40	40/40		161/162
Toronto	59/66	64/66	61/65	61/63		245/260
McGill	23/24	27/27	24/24	28/28		102/103
Sask.	21/21	21/21	21/21	20/20	18/18	101/101
Montreal	84/84	74/85	82/88	72/78		312/335
Laval	45/45	51/51	38/38	48/48		182/182
TOTAL						1630/1684
or						97%

TAXATION COMMITTEE

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members:	Dr. Robert N. Hicks, Chairman, Vancouver Dr. Bryun Sigfstead, Edmonton Dr. Elizabeth MacSween, Ottawa
Executive Liaison:	Dr. Barry Dolman, Montreal
Senior Staff:	Ms. Sandra Deziel, Manager, Executive Services
Coordinator:	Mrs. Martyne Giroux-Forget

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

A number of issues initiated by Revenue Canada in the area of self-employed professionals (and professional corporations) have been identified by the CDA Taxation Committee. These issues have potential to become serious matters for dental practices in Canada, but at the present time, only isolated incidents have been noted. The following information should be accepted as preliminary information, while the chair of the Committee continues to discuss the issues with various sections within Revenue Canada.

1. U.I.C. Contributions/Benefits Related to Spouses Employed in Dental Practices

Information from a dental practice identified a refusal by Revenue Canada of a U.I.C. maternity leave benefit claimed by a spouse working as a bookkeeper in her husband's dental practice.

The employee (spouse) and the employer (her husband) have paid U.I.C. contributions for over four years. The spouse had received a U.I.C. maternity benefit in 1990, but was refused the same benefit claim in November, 1992.

U.I.C. received a ruling from Revenue Canada that the employee-employer relationship was not at "arms length" and the hourly rate (wages) were excessive. Spouses working in dental practices are certainly not working at "arms length" with their husband employer, but the Income Tax Act states that self-employed professionals can employ their spouses. The wage of \$22 per hour for a bookkeeper was certainly not excessive.

If Revenue Canada's decision that the spouse's work does not qualify as "insurable income" is upheld in the appeals process, spouses/family members would not be required to make U.I.C. contributions. Whether their wages would be accepted as deductible expenses is another question to be answered.

The Taxation Committee is monitoring this issue closely through the local U.I.C. office and in Ottawa through Revenue Canada Audits and Rulings.

2. **"Cost Share" Arrangements Within Dental Practice Environments**

"Cost share" agreements may exist to bulk purchase dental supplies for economic benefits for closely associated dental practices. The "cost share" concept could expand to also include all expenses i.e. employees, and office expenses. All expenditures are made by the "cost share" from its bank account and each dentist contributes an amount for their share of the expenses.

Under GST the "cost share" arrangement is identified as a "person" and is required to charge GST on the individual dentist's contribution for their share of the expenses. However, a Revenue Canada letter provided an opinion which recommended a written agreement outlining the cost sharing agreement between the dentists and the "cost share". In the agreement, the "cost share" agrees to pay all expenses and taxes in an agency capacity, and the contributions by the dentists to the "cost share" would not be subject to GST.

The Committee is working to obtain an acceptable "agency agreement" for dental practices to use to avoid GST being added to share contributions in "cost share" arrangements.

3. **Dental Associates Classified By Revenue Canada as Employees**

Two situations have been brought to the Taxation Committee, in which dental associates working in a dental practice or clinic have been classified as employees and not independent contractors (i.e. self-employed). The rulings were made by Revenue Canada in one case and by a Labour Standards Officer in the other case.

When an associate loses the self-employed status, his/her monthly compensation is treated as personal income with few deductions available. The employer (i.e. the primary dentist or clinic) is required to deduct C.P.P., U.I.C., and federal income tax from the associate's wages and submit these deductions, along with the employer's required contributions to C.P.P. and U.I.C. to Revenue Canada. The net effect is the associate loses tax deductions, while the primary dentist/clinic increases operating costs.

Where a primary dentist has had an independent contractor relationship with an associate and Revenue Canada classifies this relationship as a employee, a financial problem may exist for the primary dentist.

As an employer, the primary dentist is obligated to deduct at source C.P.P., U.I.C. and federal income tax payments. If Revenue Canada rules that the associate has been an employer for the past three years, the primary dentist may face back payments plus late penalties and fines (including federal income tax payments).

Revenue Canada bases its decisions on factors present in associate agreements and/or factors present in the workplace. When all factors resemble those usually found when a person is in a position of employment and very few factors that would indicate self-employment, Revenue Canada will rule the associate is an employee.

The existence of an agreement between the primary dentist and the associate dentist is an important item in defending self-employed status for the associate dentist. However, the agreement must strongly support factors related to self-employment, such as indications of control and some risk being assumed by the associate.

The Taxation Committee will be monitoring the appeals on both of these cases and will be reporting to the profession on the information obtained.

4. Committee Response to Inquiries on Tax Matters

There is a definite increase in the number of inquiries made to the Canadian Dental Association on tax related matters. These inquiries come from dentists (mostly members), dental office staff, accountants and tax lawyers. While many inquiries are handled by CDA staff, the majority of the calls are referred to the Taxation Committee.

The inquiries vary from GST issues, to current Revenue Canada audit issues and U.I.C. issues. It is not unusual to have Revenue Canada officials - mostly GST auditors - phone the Chairman of the Committee for clarification on certain GST and Dentistry items.

The Committee has, from time to time, liaised with Revenue Canada on important tax audit issues, to provide information that resulted in a favourable decision for a dental practice.

The Committee brings this information to the Board, not to receive recognition, but rather to inform the Board of a unique membership service that is occurring and growing.

Respectfully submitted,

Robert N. Hicks, D.D.S., M.S.
Chairman, Taxation Committee

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Taxation Committee as information.

THIRD PARTY DENTAL PLANS COMMITTEE

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Luc Dugal, Chairman, Calgary
Dr. David Anderson, Windsor
Dr. Alf Dean, New Waterford
Dr. David Tobias, Vancouver

Executive Liaison: Dr. Bernie White, Saskatoon

Coordinator: Ms. Susan Matheson

1. Committee Meetings

The Third Party Dental Plans Committee has met twice since the report to the 1992 Annual Meeting: October 16-17, 1992, and January 15-16, 1993.

2. Liaison Activities

The Third Party Committee met with representatives from Canadian Life And Health Association (CLHIA) on January 15, 1993 in Ottawa to discuss issues of mutual concern.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

3. Uniform System of Codes and List of Services

The Third Party Committee continues to dialogue with Provincial Committees and Speciality Committees in order to address future changes required to the USCLS.

The Committee will be submitting the 1993 changes and/or additions to the USCLS that require Board approval, as part of the report to the Annual Meeting in September.

At the 1992 Annual Meeting, the Committee was directed to establish guidelines for the approval of procedure codes. These guidelines have been established and are being circulated to the provinces for discussion. These guidelines will be submitted to the CDA Board for consideration at the Annual Meeting in September.

4. CDA Prepaid Dental Plans Policy Manual

The Committee continues to update and revise the information in the Manual. A draft of the entire document will be reviewed by the Committee in 1993 and when funds for printing are available, the Policy Manual will be re-printed.

5. Joint CDA Third Party Committee/Provincial Meeting

The Third Party Committee initiated the concept of holding a "national forum" that would allow an opportunity for provincial members to send a representative to one CDA Third Party Meeting to discuss issues of mutual concern. The Shared Concerns Conference provided this forum in past years. Given the need to increase communication, the provinces were surveyed to identify if they would fund a member of their Provincial Economics or Third Party Committee to attend a CDA Third Party Committee Meeting in 1993. The response has been positive and the Third Party Committee has suggested the date of October 30, 1993 in Ottawa. The Committee continues to finalize an agenda for meeting. This approach allows an opportunity for the provinces to meet and discuss dental insurance related issues in conjunction with a regularly scheduled CDA Third Party Meeting.

6. CDA/CLHIA Meeting

The Third Party Committee met with representatives of CLHIA as part of the Third Party Meeting in January 1993 in Ottawa. The Committee continues to liaise and communicate with the insurance industry on behalf of the dentist members. The Third Party Committee and CLHIA will be attempting to resolve the predetermination issue by establishing guidelines identifying the type of information that is required or requested of dentists by third party carriers.

7. Canadian Association of Dental Consultants

Third Party Committee has received a request from the President of the CADC to meet with the Committee to discuss issues of mutual concern. The Committee will be corresponding with CADC to arrange an opportunity for the President to attend a CDA Third Party Committee Meeting.

8. Purchaser Information Program

The direction of PIP is involved with the dissemination of information through orders received from across Canada for the Direct Reimbursement Kit and telephone request for information. Due to budget restrictions, no aggressive activities can be implemented. However, requests for information continue to be handled by the CDA PIP office.

9. Closing Comments by Chairman

I would like to thank the Committee members and CDA staff, Susan Matheson and Pat Duminy for their continued assistance and support.

Respectfully submitted,

Luc Dugal, D.M.D., Chairman
Third Party Dental Plans Committee

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Third Party Dental Plans Committee as information.

COUNCIL ON CONSTITUTION AND BY-LAWS

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Mac Balfour, Chairman, Oakville
Dr. John Silver, Vancouver
Dr. Lynn Stone, Edmonton
Dr. Gerald Turner, Glace Bay
Dr. George Peacock, Consultant, Saskatoon

Executive Liaison: Dr. John Diggins, Vancouver

Senior Staff: Ms. Sandra Deziel

Coordinator: Ms. Bernie Dacey

1. Council Meetings

One meeting of Council has taken place since the 1992 Annual Meeting of the Board. This meeting, utilizing a conference call, was held on November 26, 1992.

ITEMS REQUIRING BOARD ACTION

2. Board of Governors

CDA Executive Council at its October meeting, put forth an amendment to Article VIII Section 1(a) (ix) and referred it to Council for incorporation into By-Laws, with the direction that both policy and bylaw amendment be addressed at the 1993 Interim Meeting. In keeping with Article XXVII - Amendment of By-Laws, notice of this proposed amendment was circulated on December 2, 1992.

RESOLVED:

93.28 THAT Article VIII, Section 1 - Composition (a) (ix) be approved as amended.

APPENDIX I

ADOPTED

NOTE: The Governors representing the affiliate members from Quebec and the corporate member in Manitoba opposed this recommendation.

3.(i) Councils, Commissions, Committees

Resolutions of the 1992 Annual Meeting:

92.76 THAT the revised Terms of Reference for the Council on Education be approved.

92.77 THAT the Council on Constitution and By-Laws be directed to review the by-laws for necessary amendment.

RESOLVED:

93.29 THAT Article XVI, Section 4, Terms of Reference (b) Council on Education be approved as amended.

APPENDIX II

ADOPTED

- (ii) Following Council's meeting, notification was received from the Director of Professional Services concerning the Terms of Reference for the Commission on Dental Accreditation and the Council on Education. Any reference in the terms to the ACFD's "Allied Dental Educators Section" should read the "Allied Dental Educators Committee". The amendment to Article XVI, Section 4 is incorporated in Appendix II.

RESOLVED:

93.30 THAT Article XVI, Section 5, Terms of Reference of Commissions (a) Commission on Dental Accreditation of Canada be approved as amended.

APPENDIX III

ADOPTED

4. Privileges of Members

Resolutions of the 1992 Annual Meeting.

92.38 THAT student members be counted as active members upon licensure following graduation; and

THAT this count be considered in the determination of representation on the CDA Board of Governors.

RESOLVED:

93.31 THAT Article VI Section 6 - Student Members be approved as amended.

APPENDIX IV

ADOPTED

5. Scientific Sessions

Council was notified that the CDA Annual Convention will be renamed the "CDA Annual Dental Meeting".

Council identified that the only Article which referred to the Convention was Article XVII, Sections, (c) Functions (iv).

RESOLVED:

93.32 THAT Article XVII (c) Functions (iv) be approved as amended.

APPENDIX V

ADOPTED

6. Gender Neutrality

Council believes the Constitution and By-Laws document should reflect gender neutrality.

RESOLVED:

- 93.33 **THAT the Constitution and By-Laws be amended to reflect gender neutrality.**

The Board of Governors agrees, but prefers the option of a blanket statement at the front of the By-Laws.

Council requests direction from the Board of Governors concerning the amendment of the document throughout or the inclusion of a blanket statement as a forward to the document.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

7. Sincere appreciation is extended to Dr. Peacock for his dedication as Chairman to the Council over many years and for his willingness to continue as a consultant to the Council.

Respectfully submitted,

Mac Balfour, D.D.S.
Chairman,
Council on Constitution and By-Laws

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Council on Constitution and By-Laws.

ARTICLE VIII

BOARD OF GOVERNORS

Section I - Composition

- (a) There shall be a Board of Governors which shall include (i) the President; (ii) the Immediate Past-President; (iii) the President-Elect; (iv) the Vice-President; (v) one member from each Provincial Corporate Member for the first 500 active and licensed life members or part thereof exclusive of members who are officers of the Canadian Forces Dental Services; (vi) one member for each additional 500 active and licensed life members or majority thereof in each province, exclusive of members who are officers in the Canadian Forces Dental Services; (vii) one member representative of the Student members; (viii) one member for each 500 active and licensed life members or part thereof of the members who are officers in the Canadian Forces Dental Services; (ix) one member representative of Affiliate members from a province wherein the Affiliate membership in that province is greater than 250 members. Every member of the Board other than a Student Member or an Affiliate member appointed in accordance with (ix) of this section shall while holding office be and remain an Active member of the Association.

ARTICLE VIII

BOARD OF GOVERNORS

Section I - Composition

- (a) There shall be a Board of Governors which shall include (i) the President; (ii) the Immediate Past-President; (iii) the President-Elect; (iv) the Vice-President; (v) one member from each Provincial Corporate Member for the first 500 active and licensed life members or part thereof exclusive of members who are officers of the Canadian Forces Dental Services; (vi) one member for each additional 500 active and licensed life members or majority thereof in each province, exclusive of members who are officers in the Canadian Forces Dental Services; (vii) one member representative of the Student members; (viii) one member for each 500 active and licensed life members or part thereof of the members who are officers in the Canadian Forces Dental Services; (ix) one member representative of Affiliate members from a province wherein the Affiliate membership in that province is greater than 250 members, **and where in the opinion of the Executive Council of the CDA, the appointment of an affiliate governor from that province is in the national interest of the profession.** Every member of the Board other than a Student Member or an Affiliate member appointed in accordance with (ix) of this section shall while holding office be and remain an Active member of the Association.

ARTICLE XVI

COUNCILS, COMMISSIONS, COMMITTEES

Section 4 - Terms of Reference Council on Education

The Council on Education shall consist of eleven members. In electing the membership of the Council, the Board of Governors will ensure that representation is constituted as follows:

- (1) One person nominated by the Canadian Dental Association.
- (2) One person who is active in Hospital and/or Institutional Dentistry nominated by the Canadian Dental Association.
- (3) Three persons from nominations by the Association of Canadian Faculties of Dentistry.
- (4) One person, being a dental hygienist, from nominations of the Association of Canadian Faculties of Dentistry's Dental Auxiliary Educators Section.
- (5) One person, being a dental assistant, from nominations of the Association of Canadian Faculties of Dentistry's Dental Auxiliary Educators Section.
- (6) One person from nominations by the National Dental Examining Board of Canada.
- (7) One person from nominations of the Provincial Dental Licensing Authorities.
- (8) One person from nominations by the Royal College of Dentists of Canada.
- (9) One lay person from nominations of the Commission on Dental Accreditation of Canada.

The President of the Canadian Dental Association on recommendation of the Executive Council shall annually appoint a member of Executive Council who shall act as the Executive Liaison.

The Chairman of this Council on Education shall be a member of the Council and appointed annually by the President of the Canadian Dental Association on the recommendation of Executive Council.

Election to Council shall be for a term of three years, staggered, once renewable. No person shall hold more than one position on the Council on Education.

CURRENT continued

The Council on Education may recommend to the Executive Council the appointment of consultants or advisors and make recommendations as well on resources required to support its initiatives. Budgets supporting this Council shall be subject to the approval of the Canadian Dental Association's Board of Governors. Expenditures of funds within budget shall be the responsibility of the Director of Education and Accreditation.

It shall be the duty of the Council on Education:

- i) To give study to all matters relating to dental, dental specialty and allied dental education.
- ii) To develop positions and make recommendations to the Canadian Dental Association Board of Governors on issues related to dental, dental specialty and allied dental education.
- iii) To serve through the Canadian Dental Association Board of Governors as a resource assisting corporate members, the National Dental Examining Board of Canada, the Royal College of Dentists of Canada, and/or provincial licensing bodies with respect to dental, dental specialty and allied dental education.
- iv) To study and make recommendations in the field of Continuing Education as it relates to dentistry.
- v) To foster the development of conferences and resources (such as the Annual Teaching Conference and the Dental Aptitude Test) of benefit to dental, dental specialty and dental auxiliary education.
- vi) To advise the Commission on Dental Accreditation of Canada on issues of mutual interest (including accreditation standards and requirements).

The Council on Education shall have the power to appoint committees and sub-committees as it shall deem expedient.

ARTICLE XVI

COUNCILS, COMMISSIONS, COMMITTEES

Section 4 - Terms of Reference Council on Education

The Council on Education shall consist of eleven members. In electing the membership of the Council, the Board of Governors will ensure that representation is constituted as follows:

- (1) One person nominated by the Canadian Dental Association.
- (2) One person who is active in Hospital and/or Institutional Dentistry nominated by the Canadian Dental Association.
- (3) Three persons from nominations by the Association of Canadian Faculties of Dentistry.
- (4) One person, being a dental hygienist **and a member** of the Association of Canadian Faculties of Dentistry's **Allied Dental Educators Committee nominated by the Canadian Dental Hygienist's Association.**
- (5) One person, being a dental assistant **and a member** of the Association of Canadian Faculties of Dentistry's **Allied Dental Educators Committee nominated by the Canadian Dental Assistant's Association.**
- (6) One person from nominations by the National Dental Examining Board of Canada.
- (7) One person from nominations of the Provincial Dental Licensing Authorities.
- (8) One person from nominations by the Royal College of Dentists of Canada.
- (9) One **Consumer/Public representative who is the representative on the Commission on Dental Accreditation of Canada.**

The Chairman of the Commission on Dental Accreditation of Canada shall sit as an observer to the Council on Education.

A representative of the American Dental Association's Council on Education shall sit as an observer to the Council.

The annual meeting of the Council on Education shall be an open meeting to representatives of organizations and/or other interested parties to include the Canadian Forces Dental Services and Deans of Canadian Dental Schools.

The President of the Canadian Dental Association on recommendation of the Executive Council shall annually appoint a member of Executive Council who shall act as the Executive Liaison.

The Chairman of the Council on Education shall be a member of the Council and appointed annually by the President of the Canadian Dental Association on the recommendation of Executive Council.

PROPOSED continued

The Chairman of Committees of the Council on Education shall be appointed annually by the President of the Canadian Dental Association on recommendation of Executive Council and in consultation with the Chairman of the Council on Education.

Election to Council shall be for a term of three years, staggered, once renewable. No person shall hold more than one position on the Council on Education.

The Council on Education may recommend to the Executive Council the appointment of consultants or advisors and make recommendations as well on resources required to support its initiatives. Budgets supporting this Council shall be subject to the approval of the Canadian Dental Association's Board of Governors. Expenditures of funds within budget shall be the responsibility of the Director of Education and Accreditation.

It shall be the duty of the Council on Education to:

- i) **Study matters** relating to dental, dental specialty and allied dental education.
- ii) Develop positions and make recommendations to the Canadian Dental Association Board of Governors on issues related to dental, dental specialty and allied dental education.
- iii) Serve through the Canadian Dental Association Board of Governors as a resource assisting corporate members, the National Dental Examining Board of Canada, the Royal College of Dentists of Canada, and/or provincial licensing bodies with respect to dental, dental specialty and allied dental education.
- iv) Study and make recommendations in the field of Continuing Education as it relates to dentistry.
- v) Foster the development of conferences and resources (such as the Annual Teaching Conference and the Dental Aptitude Test) of benefit to dental, dental specialty and dental auxiliary education.
- vi) Advise the Commission on Dental Accreditation of Canada on issues of mutual interest (including accreditation standards and requirements).

The Council on Education shall have the power to appoint committees and sub-committees as approved by the Board of Governors.

ARTICLE XVI

COUNCILS, COMMISSIONS, COMMITTEES

Section 5 - Terms of Reference for Commissions

(a) Commission on Dental Accreditation of Canada

The Commission on Dental Accreditation of Canada shall consist of fifteen members. In electing the membership of the commission, the Board of Governors will ensure that representation is constituted as follows:

- (1) One person appointed by the Canadian Dental Association
- (2) One person who is active in Hospital and or Institutional Dentistry appointed by the Canadian Dental Association
- (3) Three persons appointed by the Association of Canadian Faculties of Dentistry, one of which shall be a representative of the Committee of Deans
- (4) One person appointed by the Association of Canadian Faculties of Dentistry's Dental Auxiliary Educators Section
- (5) Two persons appointed by the National Dental Examining Board of Canada
- (6) Two persons appointed by the Provincial Dental Licensing Authorities
- (7) One person appointed by the Royal College of Dentists of Canada
- (8) One person appointed by the Canadian Dental Assistants' Association
- (9) One person appointed by the Canadian Dental Hygienists' Association
- (10) One person appointed by the Canadian Dental Association's Committee on Dental Specialties
- (11) A lay person appointed by the Commission on Dental Accreditation of Canada.

The Chairman of the Commission on Dental Accreditation of Canada shall be elected from among the members of the commission in the following fashion: Any two members of commission may propose and second a nomination to be received directly by the Canadian Dental Association Committee on Nominations, Awards and Trusts. The Canadian Dental Association Committee on Nominations, Awards and Trusts will employ a secret ballot of the Commission on Dental Accreditation of Canada if more than one nomination is received. If the ballot does or does not result in a tie, the President of the Canadian Dental Association shall on the recommendation of Executive Council make the nomination and ratify the appointment.

The term of office for the Chairman of the Commission on Dental Accreditation of Canada shall be two (2) years, renewable once by election. Election to commission shall be for a term of three years, staggered, once renewable. No person shall hold more than one position on the Commission on Dental Accreditation of Canada.

ARTICLE XVI

COUNCILS, COMMISSIONS, COMMITTEES

Section 5 - Terms of Reference for Commissions

(a) Commission on Dental Accreditation of Canada

The Commission on Dental Accreditation of Canada shall consist of fifteen members. In electing the membership of the commission, the Board of Governors will ensure that representation is constituted as follows:

- (1) One person appointed by the Canadian Dental Association
- (2) One person who is active in Hospital and or Institutional Dentistry appointed by the Canadian Dental Association
- (3) Three persons appointed by the Association of Canadian Faculties of Dentistry, one of which shall be a representative of the Committee of Deans
- (4) One person appointed by the Association of Canadian Faculties of Dentistry's Dental Auxiliary Educators **Committee**
- (5) Two persons appointed by the National Dental Examining Board of Canada
- (6) Two persons appointed by the Provincial Dental Licensing Authorities
- (7) One person appointed by the Royal College of Dentists of Canada
- (8) One person appointed by the Canadian Dental Assistants' Association
- (9) One person appointed by the Canadian Dental Hygienists' Association
- (10) One person appointed by the Canadian Dental Association's Committee on Dental Specialties
- (11) A lay person appointed by the Commission on Dental Accreditation of Canada.

The Chairman of the Commission on Dental Accreditation of Canada shall be elected from among the members of the commission in the following fashion: Any two members of commission may propose and second a nomination to be received directly by the Canadian Dental Association Committee on Nominations, Awards and Trusts. The Canadian Dental Association Committee on Nominations, Awards and Trusts will employ a secret ballot of the Commission on Dental Accreditation of Canada if more than one nomination is received. If the ballot does or does not result in a tie, the President of the Canadian Dental Association shall on the recommendation of Executive Council make the nomination and ratify the appointment.

The term of office for the Chairman of the Commission on Dental Accreditation of Canada shall be two (2) years, renewable once by election. Election to commission shall be for a term of three years, staggered, once renewable. No person shall hold more than one position on the Commission on Dental Accreditation of Canada.

ARTICLE VI

PRIVILEGES OF MEMBERS

Section 6 - Student Members

- (a) A Student Member in good standing shall be entitled annually to a certificate of membership, to receive the Journal of the Canadian Dental Association, to attend scientific meetings of the Association on payment of applicable registration fees and to enjoy all other facilities of the Association.
- (b) A Student Member in good standing shall be eligible for election to any office or agency of the Association except as otherwise provided in the By-Laws and except that he shall not be entitled to serve as a member of the Executive Council.
- (c) A Student Member shall be entitled to vote in the election of members of the Committee on Student Affairs.

ARTICLE VI

PRIVILEGES OF MEMBERS

Section 6 - Student Members

- (a) A Student Member in good standing shall be entitled annually to a certificate of membership, to receive the Journal of the Canadian Dental Association, to attend scientific meetings of the Association on payment of applicable registration fees and to enjoy all other facilities of the Association.
- (b) A Student Member in good standing shall be eligible for election to any office or agency of the Association except as otherwise provided in the By-Laws and except that he shall not be entitled to serve as a member of the Executive Council.
- (c) A Student Member shall be entitled to vote in the election of members of the Committee on Student Affairs.
- (d) **A Student Member shall be considered as an active member upon licensure following graduation in determining the list of active members under Article XVIII.**

ARTICLE XVII

SECTIONS

(c) Functions

It shall be the functions of Sections:

- (i) to supplement and cooperate with the activities of the Association.
- (ii) to act in an advisory capacity to the Association on matters relating to the Sections.
- (iii) to encourage better service for the public in practice, teaching and research in the specialized branch of dentistry.
- (iv) to assist the Association in the development of programs for the annual conventions.
- (v) to assist in the dissemination of scientific knowledge through contributions of its members to scientific programs and journals.

ARTICLE XVII

SECTIONS

(c) Functions

It shall be the functions of Sections:

- (i) to supplement and cooperate with the activities of the Association.
- (ii) to act in an advisory capacity to the Association on matters relating to the Sections.
- (iii) to encourage better service for the public in practice, teaching and research in the specialized branch of dentistry.
- (iv) to assist the Association in the development of programs for the **Annual Dental Meeting**.
- (v) to assist in the dissemination of scientific knowledge through contributions of its members to scientific programs and journals.

COUNCIL ON INSURANCE AND INVESTMENT (CDSPI)

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members:

- Dr. J. Brookfield, CDA
- Dr. G. F. Copithorne, British Columbia
- Dr. J. M. Dillon, Manitoba
- Dr. W. A. Glave, Ontario
- Dr. R. J. Markey, CDA
- Dr. R. L. Rasmussen, Alberta
- Dr. R. D. Wells, Ontario
- Dr. G. S. Zwicker, Nova Scotia

Management Committee:

- Dr. R. L. Moran, President
- Dr. J. N. Wright, Secretary
- Dr. G. Dubé, Treasurer

Observers:

- Dr. D. W. Allen, Prince Edward Island
- Dr. B. Knoblauch, Saskatchewan
- Dr. R. Sexton, Newfoundland
- Dr. R. A. Turcotte, New Brunswick

1. Council Meetings

The Board of Directors of CDSPI met as the Council on Insurance and Investment of the CDA on August 30 and 31, 1992 in Calgary and December 11 and 12, 1992 in Toronto. The Council is scheduled to meet next on April 29 and 30, 1993 in Toronto.

There are no items from the Council on Insurance and Investment requiring Board action.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1. Imperial Life - Legal Matters - CDA RSP

At the December 1992 meeting of the CDSPI Board, a proposal was presented by Management which outlined the conclusion of seven months negotiations with Laurentian Imperial and Imperial Life Executive. The report outlined a proposal to bring to an end all of the legal matters between Imperial Life, CDA and

CDSPI, as well as reinstate financially a number of items within the CDIP Life and LTD plans. This proposal was approved by the CDSPI Board, and forwarded to CDA's Management Committee. The Management Committees of CDA and CDSPI and the CDA Executive Director, and CDSPI Executive Vice-President and In-House Council had a telephone conference call on Wednesday, December 16th, 1992. CDSPI responded to questions from CDA Management. At the time of the writing of this report, it is our understanding that the business proposal to conclude these legal matters, along with a recommendation to renew the CDA RSP with Imperial for a four year period, has been considered by the CDA Executive Council. CDA Management/Executive Council will be reporting to the Board of Governors on this matter under their reports.

2. **HIV Lump Sum Coverage**

During 1992, CDSPI, at the request of the CDA and Registrars, investigated the availability of HIV Lump Sum coverage which would "kick in" when an individual is diagnosed as having HIV. Our negotiations were not able to obtain this coverage on a voluntary basis. In fact, one market was removed from the street as negotiations took place. The only type of coverage that could be provided was on a mandatory basis. This was communicated to the CEOs and Registrars at their December meeting, and to the CDSPI Board the week following. The Board noted the comments from the CEOs and Registrars that they would not be interested based on HIV coverage which was mandatory. This information was passed on to the CDA Management as information.

3. **New Plans/Programs**

CDSPI has been meeting with all of the insurers of the CDIP plans in 1992, in order to examine them in detail, re-define, and re-structure the plans if necessary, in order to ensure that the CDIP plans continue to serve the profession well, to the level where they can be competitive to the street, and still serve the profession in the 90's.

In connection with the benefit plans, the Life, LTD and Office Overhead, are all under extensive review and a report will be coming to the CDSPI Board in April and on to the CDA in September of 1993. Any new authorized plan changes could then take place January 1, 1994.

The AD&D plan which was re-designed is receiving significant success with most new applications being for the maximum coverage of \$250,000 and for the comprehensive level of coverage.

The General Insurance plans, are also under review. There are a number of ways that the financial aspects of the general plans can be designed, and these are currently being investigated. TripleGuard is launched, and will provide the profession with higher limits at cheaper rates. It is extremely competitive to the street both in coverage and in premiums. CDA Management received a recommendation from CDSPI in December, pertaining to minor coverage improvements at no premium costs. These were also considered by the Executive Council at the time that the Imperial Life matters were discussed. These presumably will be presented under Management or Executive Council's report.

As you are all aware, the brokerage firm of Marsh & McLennan have approached the provinces who co-sponsor the general plans and malpractice insurance with an invitation to leave CDIP and start their own plans. Although the initial thrust specifically directed to malpractice, it also appears to include the other general plans. CDSPI met with Marsh & McLennan, and subsequently also discussed this area with the CEOs and Registrars and our Board in December. A memorandum on their proposal was sent to all co-sponsoring provinces, a copy of which is attached as APPENDIX I. It is felt that the memorandum outlines the situation, and we strongly urge the provinces to continue co-sponsoring the general programs and not fragment the profession. Such fragmentation is detrimental to the profession.

APPENDIX I

CDSPI will be discussing various financial aspects of the general plans with the insurer and our consultant. A report will be brought to the CDSPI Board in April and possible recommendations to CDA in September of 1993.

Other new programs that we are investigating include a CDA-RRIF.

Once again, it is hoped that a report on RRIF can be brought to the April Board meeting of CDSPI and recommendations to the CDA in September. Our surveys of members have found that a RRIF program would be strongly supported by the profession.

4. CDIP Plan Financial Experience

At the time of the writing of this report, for presentation to the Executive Council in February, and the Board of Governors meeting on May 1, 1993, full audited financial figures for the plans are not available.

We anticipate that these figures will be presented to our Board on April 29 - 30, 1993, following which they will be forwarded to the CDA for final consideration and approval at the September Board of Governors meeting. At that same time, CDSPI will forward to the CDA, comments and/or recommendations on the status and use of surplus.

We can report at this time, that the financial experience for the CDIP benefit plans at Prudential, as at August 31st, 1992, show the eight months financial experience as being very favourable. However, it is an extremely short period of time to determine any type of trend or future projection in this area. In discussions with the insurer however, we are optimistic about the financial stability of the plans at Prudential. Similarly, at this time we do not anticipate any surprise financial results on the general side and 1994 contract negotiations are already under way.

5. **CDSPI Image/Marketing**

CDSPI Management have become concerned with the Marketing budget of CDSPI, how it is being spent, and the results being achieved. To that end, Management took steps in the Fall of 1992 to address these concerns. In December, following our Board meeting, CDSPI Management retained Manifest Communications (the same communications firm used by CDA) to review our marketing thrust, look at our image, and bring forth and develop with CDSPI and the profession's input, a marketing strategy for 1993 (immediate) mid-term and long-term (three years). The entire marketing structure of CDSPI, and how we provide the marketing service to you, our client, is under review. At the time of the writing of this report, we have not as yet had a planning meeting with the consultants. A full "focus group" meeting is proposed for January 13, 1993 and a full report will be presented to CDSPI Management in February of 1993. A progress report will then go to the CDSPI Board at the end of April. Undoubtedly, in 1993 you will see a change in the image, the approach, and the concept of marketing CDIP and the CDA RSP, as well as the corporation CDSPI. As you see this strategy unfolding, we would appreciate hearing from you and your comments on the new approaches.

6. **General Information**

The following are some general comments regarding CDIP which you may find of interest:

-
- For January 1, 1993 invoicing, we switched everyone having the three general insurance plans (excluding malpractice) automatically to TripleGuard. Most participants seemed extremely happy and have commented on the cost savings that has been passed on to them. Over fifty new applications for TripleGuard have been returned as of December 18th, 1992.
 - Applications continue to arrive at CDSPI for the new Data Processing, Deferred Income Tax Expense and Retirement Protection options under the LTD.
 - CDSPI is taking a very aggressive approach with the graduates, students and undergraduates. It is CDSPI's plan to phone all 1992 graduates who received their first CDIP invoice and have not paid. We feel this one to one contact will allow us to explain the reasons for the coverage and the importance of its maintenance.

Student applications at the end of 1992 were at an all time high. Over 230 applications have been received which is much higher than the dozen that was received in past years. The reason for the increase was a direct result of the applications being provided to all third year student representatives. We are also pleased to note that some bought CDA membership in order to qualify for this coverage. CDIP can be a strong membership benefit for the CDA.

- CDA RSP when compared to the industry average, shows the funds performance as being extremely favourable. Make sure your contacts are aware that the performance figures are published in financial newspapers.
- An interesting statistic -- 53% of current CDIP participants have been with CDIP for fifteen years or more.

Respectively submitted,

Roderick L. Moran, D.D.S., F.R.C.D. (C)
Chairman, CDA Council on Insurance and
Investment
President, CDSPI

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Council on Insurance and Investment as information.

TO: CDIP Co-Sponsors

FROM: Kingsley D. Butler
Executive Vice-President, CDSPI

DATE: December 15, 1992

SUBJECT: CDIP GENERAL INSURANCE PLANS - MALPRACTICE SOLIDARITY

At the CDSPI Board of Directors meeting in Toronto on December 11th & 12th, 1992, a discussion on CDIP Malpractice Insurance and the recent approaches to provinces by Marsh & McLennan was discussed. Included in the discussions were points raised at the recent CEO/Registrars Conference.

The CDSPI Board of Directors has directed me to provide to each CDIP Co-sponsor a synopsis of the various points as to why a province should strongly consider not having any further discussions with Marsh & McLennan and inform them that you are remaining with the CDIP for this coverage.

It is the consensus of the CDSPI Board that the long run fragmentation of the profession in connection with the CDIP malpractice or any other type of insurance is detrimental to the profession. If there is a concern about the current malpractice coverage being inadequate, CDSPI should be informed of this so that it can be addressed. We have had no indication that CDIP Malpractice is not providing quality coverage to the profession. A review of the very few coverages that are available on the street or through other dentists' groups shows CDIP coverage as being equal to or better than that being offered, and at a better rate.

CDIP Malpractice has had a stable and secure market with the Guardian Insurance Company of Canada since 1978. This stability is second to none in the dental malpractice insurance marketplace. In addition to this stability, CDSPI has negotiated, through our broker, on behalf of the co-sponsors and the CDA, market guarantees (currently until 1995) and premium caps on increases (the caps have never had to be used). The insurer being promoted by Marsh & McLennan has been in and out of the Canadian malpractice market three times in the last six years. Additionally an internal bulletin from their own head office cautioned their own branch offices from placing coverage with the insurer that they are now recommending.

Further observations are:

- Why pay for a new administrative service to be created when one already exists through CDSPI?

- Why look at training new adjusters and new malpractice legal experts when they already exist across Canada with Guardian. Guardian's adjusters and legal experts have been with them since the beginning of the plan and have long term continuity which can be of great benefit over the length of malpractice claims, which sometimes take as long as seven years to conclude?
- Why would your organization want to become involved in insurance administration, claims adjudication and other insurance matters which is not an area of your expertise? Why not leave this to the CDIP where any concerns can be handled for you?
- One should also consider the unfavourable experience of the American Dental Association with this same broker and insurer.

When one considers insurer stability, market guarantees, premium levels and competitiveness as well as the administration structure that is already in place, the CDSPI Board questions what is lacking from the current program. There is also the fact that there is strength in numbers by the profession remaining together, to support and assist each other in a mainstay product, required in order to protect the public and permit the practice of dentistry.

As you are aware, CDSPI has been approached by and talked with the head office of Marsh & McLennan. Management and the Board of CDSPI have reviewed their proposal and see no reason to pursue it any further. As a result of this we are sure they will aggressively approach each co-sponsor to implement your own program. We ask for what purpose?

CDSPI as the Council on Insurance and Investment of the CDA has been working with our broker and general insurance consultant since early 1992 to review every aspect of the general plans to determine if they can be made better. Our Board will be receiving the results of that review at the April 1993 Board meeting. If the Board deems it necessary, any improvements in the general insurance plans of CDIP (including the malpractice plan) will go forward to the CDA September 1993 Board meeting.

We strongly urge you to consider the above points and your co-sponsorship of CDIP.

Yours truly,

Kingsley D. Butler, C.A.
Executive Vice-President
Ext. 222

cc. CDSPI Directors/Observers
Jardine Neilson

FDI NATIONAL TREASURER

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1992 FDI WORLD DENTAL CONGRESS

BERLIN, GERMANY -- SEPTEMBER 21-25, 1992

The 1992 FDI World Congress in Berlin was officially opened on Monday, September 21, 1993, in a moving ceremony. The FDI was stunned by the sudden death of its President, Dr. Kazuo Yamazaki during the first year of his term in office, and a major part of the opening ceremony took the form a tribute to Dr. Yamazaki's contribution to world dentistry. He was posthumously admitted to the honour role of the FDI, the highest honour that the Federation bestows upon a member. This honour was accepted by Dr. Yamazaki's brother, who acted as spokesperson for the immediate family.

The reunification of Germany was the principal theme of the Opening Ceremony, with a brief welcoming address from the Vice-Chancellor of the FRG, Herr Jürgen Möllemann, and most moving and riveting address by the mayor of Berlin, Herr Eberhard Diepgen.

The Opening Ceremony closed with the installation of Dr. Clive Ross of New Zealand as President of the FDI.

The Congress had 4062 participants from 90 countries. The attendance was comprised of 3079 dentists, students and assistants, and 983 accompanying persons.

A memorial session was held on Sunday, 20 September, for Dr. Gerald Leatherman, Executive Director Emeritus of the FDI, who died last year.

There were several foci on which the Canadian delegation invested its time during the Berlin congress:

1. General Assembly Business Meetings

General Assembly A and General Assembly B took place on September 21 and September 26, 1992. At the General Assembly business meetings, Canada was officially represented by Dr. Bernard Dolansky, CDA President, and Mr. Jardine Neilson, CDA Executive Director and FDI National Treasurer-Canada.

The General Assemblies focused their time, in addition to administrative matters related to the ongoing operation of the FDI, on the major constitutional revisions

which are being proposed for the FDI. These include the conversion of the FDI from what we would know in Canada as a not-for-profit organization under federal legislation to registration as a charity under British law. There is also a proposal to move the legal headquarters of the FDI from Belgium to the UK. A third major thrust of the constitutional change involves restructuring the commissions and committees of the FDI into a more streamlined arrangement. It is a generalization, but fairly accurate to say that the legal headquarters and charitable status questions were left in abeyance by the end of this meeting, and the restructuring proposals were, by and large, approved by the Assembly.

Elections were held during Assembly B; the following vacancies were filled:

Dr. Heinz Erni (Switzerland) was elected President-Elect.
Dr. Arthur Dugoni (USA) was elected Treasurer.
Dr. Katsuo Tsurumaki (Japan) was elected Vice-President
Dr. Adolph Schneider (Germany) was re-elected, and Dr. Heung-Ryul Yoon (Korea) was elected, filling two Councillor positions.
Dr. Stefaan Hanson (Belgium) was re-elected as Belgium Legal Representative.

Dr. William Thompson, retiring Treasurer, and his wife Doris received a heartfelt tribute for the great contribution that they had made to the FDI over the many years, and for their special personal qualities of straightforwardness, integrity and warmth.

2. National CEO's Meetings

The National CEO's meetings took place on September 18 and September 24, 1992.

These meetings have evolved over the past several years from one-hour social gatherings over coffee to discuss items of common interest and exchange business cards, through two-hour sessions focusing on continuing education subjects intended to assist national associations in such areas as membership development and maintenance, and office computer systems, through to two full half-day sessions focusing on the real business of associations, and how various CEOs can put their national resources to the benefit of every other organization. This forum has indeed become an extremely valuable learning experience and resource for most participating associations.

3. FDI National Treasurers Meeting

The FDI National Treasurers' meeting took place on Tuesday, September 22, 1992.

The FDI National Treasurer's meeting traditionally focuses on what could be commonly called the life blood of the FDI -- its financial support. There have been moves over recent meetings to revamp the structure by which FDI receives its

financial support from individual dentist members called supporting members and national association grants to the FDI.

The nub of the discussions focused on the creation of four new membership categories, which would include a category allowing dentists who are not members of national associations, to become members of the FDI. The benefits to non-national association FDI members, and national member association FDI members differ only in financial considerations, such as the registration fee for attendance at the FDI World congress, which was not judged by those participating in the discussion to be significant, and subscription discounts on the World Dental Journal, the revised and revamped official publication of the FDI.

The proposal to introduce a non-national association FDI membership was opposed by the FDI National Treasurers, although it is the General Assembly which is supreme as to approval or disapproval. Discussion in General Assembly opposed this proposal. Canada supported this opposition to individual member status (without corresponding national association membership), since CDA treats and markets FDI membership as a membership benefit of belonging to the CDA. Your delegates will continue to support this view unless directed otherwise.

4. Question Period

Question Period occurs between General Assembly A and General Assembly B, with the purpose of allowing any delegates to pose questions, raise issues and promote discussion on topics of interest to them and their national associations. This meeting has the potential for exciting debate, given the wide divergence of views on such basic issues as, "should the delegates to the Assembly be subject to a voting protocol of one country one vote, or should it remain with the number of votes of a national association member being equal to the number of delegates allocated according to membership".

This year, question period also focused on the question of non-national member association members versus national member association members. The tenor of the question period group favoured maintaining membership linked directly to national member association membership.

5. FDI World Congress

Several intensive promotional activities related to FDI World Congress 1994, Vancouver took place in Berlin.

The FDI '94 promotional team comprised all official delegates and alternate delegates and spouses, delegates to the military commission and spouses, Vancouver local organizing committee members present, and representatives of the British

Columbia College of Dental Surgeons and spouses. This team took part in organizing, manning, and operating the promotional activities, which included a very successful and well-frequented booth, and an over-subscribed luncheon to promote FDI WC '94. The promotional activities were extremely successful. Over 1500 delegates took the time to not only visit the booth, but to personally fill out name and address forms making them eligible for further mailings concerning FDI 1994. In the way of World Congress affairs, this was an extraordinary response.

Promotional activities will be repeated in Göthenberg, Sweden, and hopefully with the same enthusiastic participation as the group which carried out its responsibilities in Berlin.

Future World Congresses are as follows:

- 1993 Göthenberg, Sweden (August 29-September 2)
- 1994 Vancouver, Canada (October 2 - 8)
- 1995 Hong Kong (October 22 - 27)
- 1996 Orlando, Fla., USA
- 1997 Seoul, Korea

Respectfully submitted,

Jardine Neilson, BA, MSW, CAE
National Treasurer - Canada

FILING OF REPORT

The Board of Governors receives with appreciation the report of the FDI National Treasurer - Canada as information.

**ASSOCIATION OF CANADIAN FACULTIES OF DENTISTRY
L'ASSOCIATION DES FACULTÉS DENTAIRES DU CANADA**

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

The President and Vice-President attended the NDEB Symposium held November 1 & 2, 1992, in Ottawa at which provincial licensing authorities, NDEB, ACFD and other groups or individuals presented various options for Certification and Licensure. ACFD/AFDC feels that a meeting involving NDEB, ACFD and the provincial licensing authorities should take place no later than next March in order to obtain a consensus in relation to this long standing problem.

The ACFD/AFDC FORUM will be published three times per year beginning in 1993 due to budgetary constraints. The Management Committee is looking into the sale of advertising space in this publication. Should this prove successful, THE FORUM will resume quarterly publication.

A protocol for the submission and selection of CFDE/CDA Teaching Conference topics has been developed and will be published in THE FORUM and the CDA Journal in the near future. It is hoped this will clarify procedures for interested parties and enable ACFD/AFDC to provide the CFDE/CDA with suitable topics well in advance.

The 1993 Summer Teaching Institute will be held June 5-11, 1993 and the Summer Management Institute June 8-13, 1993, both at the University of Western Ontario. There will be space for up to 16 participants for the Management Institute and up to 24 for the Teaching Institute. Faculty members from all ten dental schools as well as from affiliate member institutions are eligible to apply to attend these Institutes in June. To a great extent these Institutes are funded by the Canadian Fund for Dental Education. ACFD/AFDC has expressed its most sincere appreciation for the Fund's support in the past and we look forward to many more years of con-joint ACFD/CFDE funding for the Institutes.

Lors de la réunion générale annuelle de l'AFDC, le Comité des affaires étudiantes de l'ADC présentait un article intitulé "Student/Staff Relations: Something to Think About". Le principal sujet d'inquiétude des étudiants a trait aux communications et observations faites par certains professeurs ou cliniciens lors d'activités cliniques et plus spécifiquement en présence de patients. Copie de ce rapport a été transmise pour étude à toutes les facultés dentaires canadiennes afin que des mesures correctives soient mises en place si un tel problème existait dans le cadre des cliniques.

"Student Evaluation of Teachers -- Is It Worth It?" will be the Plenary Session topic at the ACFD/AFDC Annual General Meeting in Saskatoon, June 19-21, 1993. A 45 minute paper on this topic will be presented by Bruce Moxley of Dalhousie University followed by a panel discussion. All Committees, Council members and guests are invited and encouraged to participate in the discussion at the Plenary Session.

The ACFD/AFDC will be meeting in conjunction with the AADS in 1994 in Seattle, Washington. Preliminary discussions are under way with the Executive Director of AADS. The 1995 meeting site will be Winnipeg. Future unconfirmed sites are McGill University, Montreal in 1996, University of Toronto 1997 and University of British Columbia, Vancouver 1998.

"Admission Requirements for Canadian Dental Faculties" is a publication which has been produced by ACFD/AFDC for the information of perspective dental students. It provides a summary of each Dental Faculty's Admission Requirements and is available through the Central Office, 1815 Alta Vista Drive, Suite 109, Ottawa for a \$25.00 fee. This document will be updated annually and available upon request.

Une trousse "Orientation" à l'intention des professeurs nouvellement engagés dans les diverses facultés a été mise au point par le Comité de développement facultaire plus spécifiquement par le Dr Hardy Limeback de Toronto. Cette trousse sera distribuée dans chaque faculté dès le printemps prochain. Cette dernière guidera efficacement tout nouveau professeur dans son cheminement ainsi que dans le développement de sa carrière professorale.

Faculty members and members of affiliated schools have the opportunity to apply for project funding from ACFD/AFDC. Management Committee has set aside \$10,000 to help in the funding of individual or group projects related to teaching, faculty development and other subjects that are of national concern and benefit to scholarly activities. A maximum of \$2,500 will be allocated to each project that is accepted for a total of at least four funded projects during the coming year.

ACFD/AFDC encourages all members to take part in the CFDE/ACFD Challenge which was introduced a few years ago to all members of the Association. Since faculty and related faculty activities are often endowed by the Fund, we are hoping to increase the generosity of Faculty members.

The W.W.Wood Award for Excellence in Dental Education will be presented again this year. Individual Faculty members named to receive the award will be announced at the Annual General Meeting in June.

The budget pressure experienced by Canadian Faculties of Dentistry in the last few years along with discussions of faculty closures and other faculty resource problems have contributed to a decision to develop a Resource Centre at the Central Office of the ACFD/AFDC. Information on budget, operating costs, faculty and other pertinent information will now be readily available.

Suite au départ du doyen Kenneth Zakariasen, le docteur William MacInnis a accepté d'agir en tant que doyen par intérim jusqu'à la nomination d'un nouveau doyen selon le processus en vigueur à l'Université de Dalhousie. La même situation prévaut à l'Université de Saskatchewan où le docteur Ray McDermott a pris la responsabilité de doyen par intérim.

Le Comité des doyens de l'AFDC s'est réuni en décembre lors de la réunion des doyens nord-américains. Les discussions ont alors porté sur les dernières propositions amenées,

Respectfully submitted,

Gérald Albert, D.D.S.
President, Association of Canadian
Faculties of Dentistry

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Association of Canadian Faculties of Dentistry as information.

CANADIAN DENTAL ASSISTANTS' ASSOCIATION

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

The Canadian Dental Assistants' Association welcomes this opportunity to report to the Board of Governors on the activities of the Association since August 1992.

CDA Executive:	President:	Betty Copp, New Brunswick
	Vice-President:	Gail Armitage, Alberta
	Past President:	Ellen McCloskey, Prince Edward Island
	Interim-Registrar:	Louise Mabey, Alberta

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1. The CDAA will hold its Annual Board of Directors meeting April 30th to May 2, 1993 in Toronto, Ontario in conjunction with the CDA Convention.
2. National Board Certification Program

We are pleased to report that both Level I and Level II exams are being offered twice a year. The CDAA Council on Certification and Education is continuing to update the Exam questions banks throughout 1993.

We are pleased to report that the Registrars have agreed to meet with our representatives during the CDA Convention. The Association is most appreciative of the opportunity to present the details of our program to this group, and anticipates receiving valuable feedback.

3. National Dental Assistants' Recognition Week

The 1993 National Dental Assistants' Recognition Week will run March 21-27, 1993. This year's theme "Dental Assisting - A profession to be proud of" is truly indicative of our professional pride.

4. Organizational Development

The CDAA has approved a new Board structure and directed the Association By-Laws committee in developing a new constitution and terms of reference. The development of a mission statement and strategic plan remain a top priority in the management of the Association. Implementation of the developing organizational changes is targeted for 1994.

5. Publication

The CDAA Journal is published three times a year. Diane Pike from Brockville, Ontario, is serving as Journal Editor for 1993. The first issue of 1993 will contain a Readership Survey to assess the needs of the CDAA membership.

6. Office Relocation

Our office is currently located at 869-871 Dundas Street, Dundas, Ontario with the Ontario Dental Nurses and Assistants Association. The Executive Committee is presently considering proposals for a permanent office location.

We are pleased to report that Gloria Chalmers has been hired as the CDAA Administrative Assistant in our London office.

The CDAA continues to experience growth and development as a national professional organization. 1993 will be a challenging year for CDAA, filled with opportunity.

On behalf of the CDAA Board of Directors, I wish to extend sincere appreciation to the CDA Management Team for their continued support and consideration. The CDAA wishes you, the Board of Governors, continued success in your endeavours.

Respectfully submitted,

Betty Copp, C.D.A.
President,
Canadian Dental Assistants' Association

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Dental Assistants' Association as information.

CANADIAN DENTAL FOUNDATION

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Bradley Holmes, President, Kenora
Mr. Ronald Bonar, Vice-President, Toronto
Mr. Jardine Neilson, Secretary-Treasurer, Ottawa
Mr. Don Pamentor, Halifax
Dr. Arthur Schwartz, Ottawa
Dr. John Silver, Vancouver
Dr. Doug Smith, Belleville

Coordinator: Martha Vaughan

Meetings

CDF Directors have met once since the last Board of Governors meeting in Calgary, on November 20, 1992.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1. Discussions concerning the amalgamation of the administrative functions for CDF, CFDE, CDRF and the Library Trust Fund are continuing.
2. The terms of office of Drs. Doug Smith and John Silver have been extended until after the amalgamation plans have been finalized.
3. Directors reappointed the firm of McCay, Duff and Company as auditors for CDF.
4. Representatives from Royal Bank Investment attended the CDF meeting and reviewed the portfolio performance. Early unaudited statements project that the 1992 revenue from CDF investments will be approximately \$190,000.00.
5. The CDA Librarian submitted an annual report of the year's activities of the Sydney Wood Bradley Memorial Library, which is fully automated and continues to provide research and reference services.

Respectfully submitted,

Bradley Holmes, D.D.S.
President,
Canadian Dental Foundation

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Dental Foundation as information.

CANADIAN FUND FOR DENTAL EDUCATION

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

Board of Trustees: Dr. Gordon Thompson, Edmonton, Chairman
Mr. Lee Maddison, Burlington, Vice-Chairman
Dr. Greg Baird, Halifax
Dr. François Bourassa, Regina
Dr. Robert Dupont, Montreal
Mr. Jardine Neilson, Ottawa, Ex-officio
Dr. Donald O'Connor, Ottawa
Dr. David Singer, Winnipeg, Dental Education
Dr. Arnold Steinbart, Prince George
Mr. Arthur Zwingenberger, Toronto

Fund Administrator: Mrs. Julie Hentschel

1. Meetings

The Canadian Fund for Dental Education has not met since its report to the CDA 1992 Annual Meeting; business was conducted by correspondence and telephone.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

2. 1992 Income

Total income from all sources was \$411,294 in 1992, an increase of \$15,029 over 1991 income. \$374,598 in donations were directed to the unrestricted general fund, while donations to the endowment and developing funds, which are restricted in use according to the specific guidelines of each of the funds, received \$36,696.

Total donations from dentists decreased by 16% in 1992, although most other income areas held the line or saw healthy increases in receipts.

CFDE investments earned an average 9.75% interest over the year due to favourable interest rates on several long-term capital investments which were acquired in 1989 and 1990 when rates were significantly higher.

3. 1992 Disbursements

The CFDE Trustees approved grants totalling \$251,332 in 1992. CFDE grants supported eighteen dental education and research programs over the past year.

A donation of dental equipment (Gifts in Kind) made by a CFDE corporate sponsor made possible the reinstatement of the dental hygiene program at Niagara College Welland Campus.

4. **1992 Operating Expenses**

Total operating expenses for 1992 were \$122,067, which when broken down represents \$55,894 fund raising expenses, \$23,770 expenses to general programs, and \$42,403 management and general administration expenses.

5. **Management Committee Meeting**

The CFDE Management Committee is scheduled to meet February 7, 1993 to review and analyze the financial statements for 1992.

6. **Endowment Funds**

Contributions to endowment funds totalled \$34,542 in 1992.

Following the untimely death of Lieutenant-Colonel Charles Hunt, the Charles Hunt Endowment Fund received donations totalling \$8,202, bringing the current principal in this endowment fund to \$18,501.

The Board is pleased to report that the Ken W. Lawless Fund has reached \$13,200. and has subsequently attained Endowment Funds status. Dr. Ken Lawless, of Kingston, Ontario, established this fund on behalf of referring dentists in his area. The annual interest earned on the Ken W. Lawless Endowment Fund will be used to support programs in dental education and research.

The CFDE gratefully received a \$10,000. contribution from Dr. Allan Chantler, a retired Ontario dentist, who after a lifetime career in dentistry wanted to offer his support to the profession in return. The Dr. Allan Chantler Endowment Fund will be directed to general dental education and research programs and will also provide assistance to dental students in financial difficulty.

Current balances of other increasing Endowment Funds are as follows:

Nicholas A. Mancini Fund	\$ 37,473
Murray McDonald Fund	58,985
George W. Barrett Fund	19,314
Thomas Curry Fund	18,608

7. **Developing Funds**

Donations received in memory of the late Mr. Donald Winget are recorded in the financial statements under a special designation termed "Developing Funds". The current balance in the Donald Winget Developing Fund is \$8,230.47.

CFDE guidelines state that Developing Funds must reach \$10,000 within five years to become named Endowment Funds, or revert to unnamed general funds.

8. **Appreciation**

In all, 1992 was a good year for the CFDE. Despite difficult economic times, the CFDE marked its 30 years of service to dentistry by continuing to offer its invaluable support to dental education and research programs in Canada.

Thanks to the dental profession for their personal contributions in 1992. It is the loyalty and generosity of these valuable supporters that continues to increase the potential for assistance to dentistry. The CFDE's goal is to encourage all dentists and allied dental health professionals in Canada to support our future work.

Thanks must also be extended to all of the organizations who contribute so much of their time and money, and who generously promote the CFDE at meetings and in their publications.

I would also like to thank my colleagues on the CFDE Board of Trustees, and our Fund Staff for their hard work and dedication.

May I express my sincere appreciation to all who contributed to the CFDE in 1992. I look forward to your continued commitment.

Respectfully submitted,

Gordon W. Thompson, Chairman
Canadian Fund for Dental Education

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Fund for Dental Education as information.

THE NATIONAL DENTAL EXAMINING BOARD OF CANADA

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

REPORT ON THE 1992 ANNUAL MEETING

The National Dental Examining Board of Canada (NDEB) considered and acted upon the following agenda items:

1. Current Graduate Certification

To November 1, 1992, the NDEB had issued 453 certificates to current graduates in Canada (Appendix I).

APPENDIX I

The most important activity in 1992 in current graduate certification was the completion of Pilot Project 2 with NDEB external examiners in five dental schools in Canada. The pilot projects were highly satisfactory and the report of Pilot Project 2 was to be widely distributed. The NDEB expressed its appreciation to the dental faculties in Canada for their cooperation.

As a result of a directive from the provincial licensing authorities, the NDEB passed the following motion:

WHEREAS, the maintenance of a national certification system remains a primary objective of the provincial licensing authorities and the NDEB, and

WHEREAS, the maintenance and enhancement of the principle of national portability continues to be a desirable objective, and

WHEREAS, the provincial licensing authorities have requested that all students in their final year in an approved Canadian dental faculty take a written examination, and

WHEREAS, the NDEB and ACFD have accepted the principle of the external examiner system and the external examiners will examine every final year student in all Canadian faculties of dentistry, and

WHEREAS, the NDEB external examiners, after full discussion with faculty members, may determine that a candidate has not achieved a passing grade,

BE IT RESOLVED

THAT the external examiner system be instituted by 1994 for all Canadian faculties of Dentistry, and

THAT the external examiners will have the right to recommend to the NDEB that a student not receive the NDEB certificate, and

THAT should a decision by the NDEB be that a student not receive a certificate, when the student is being recommended for a degree by his/her faculty, then this fact will be communicated to the Commission on Dental Accreditation of Canada, and

THAT the NDEB, following consultation with the provincial licensing authorities and the ACFD, implement a written multiple choice examination for all students of the Canadian faculties of dentistry, commencing after January 1994, and

THAT the President of NDEB be in contact with the provincial licensing authorities to convey this information and to determine the extent of their financial support as required by the NDEB to implement both the external examiner system and the written examination.

2. Examinations

NDEB Committees and examiners spend a considerable amount of time every year in reviewing all aspects of the examination process to ensure that they are fair and reflect current knowledge and professional practice. In order for the NDEB to maintain the validity and reliability of its examinations, a continuous monitoring takes place of the various examination components, the evaluation criteria and their interrelationships.

The NDEB examination material bank and examination expertise is being more and more utilized by provincial licensing authorities and dental faculties.

The NDEB approved a revised comprehensive examination as follows:

THAT the NDEB comprehensive examination be as follows:

<u>Written Examination</u>	<u>TIME</u>
I Written multiple choice (300 items)	1 day
II Evaluation, Diagnosis & Management of Patients	1 day

The written examinations could be given in several centers at the same time.

Clinical Examination

I	<u>On Manikins</u>	2 1/2 days
a)	Restorative Dentistry	
b)	Clinical procedures selected from endodontics, orthodontics, pediatric dentistry, periodontics, prosthodontics and surgery	
c)	Masticatory Physiology	
II	<u>On Patients</u>	2 days
a)	Two restorative procedures	
b)	Masticatory Physiology	
	TOTAL	6 1/2 days

and

THAT this new structure be submitted to all provincial licensing authorities for approval, and

THAT upon approval from all provincial licensing authorities it be implemented as soon as possible.

Examination data - see Appendix II.

APPENDIX II

3. Legal Activity

The NDEB is encountering an increasing number of appeals from unsuccessful candidates, however, only one of these had resulted in a court case in 1992.

4. Reports from Other Organizations

The NDEB was addressed by the Presidents of the CDA, ACFD and RCDC.

5. Officers of the Board

President	Dr. R.C. Baker
President-Elect	Dr. R.G. Canning
Past-President	Dr. A.F. LaBounty
Executive Committee Members	Dr. R. Salois
	Dr. P.A. Watson
Executive Director & Registrar	Dr. G. Kravis
Executive Secretary & Treasurer	Mrs. F. Dawes

6. Meeting Dates - 1993

Executive Committee	-	30 April	-	Ottawa
Executive Committee	-	13 November	-	Ottawa
Annual Meeting	-	14 & 15 November	-	Ottawa

Respectfully submitted,

G. Kravis, Executive Director and Registrar
National Dental Examining Board of Canada

FILING OF REPORT

The Board of Governors receives with appreciation the report of the National Dental Examining Board of Canada as information.

THE NATIONAL DENTAL EXAMINING BOARD OF CANADA
LE BUREAU NATIONAL D'EXAMEN DENTAIRE DU CANADA

NDEB CERTIFICATES ISSUED TO CURRENT GRADUATES

FACULTY	1988		1989		1990		1991	
	No.of Grad.	NDEB Cert.	No.of Grad.	NDEB Cert.	No.of Grad.	NDEB Cert.	No.of Grad.	NDEB Cert.
ALBERTA	45	45	45	45	49	49	43	43
B.C.	37	37	40	40	39	39	37	37
DALHOUSIE	45	45	38	38	40	40	27	26
LAVAL	30	29	38	38	42	42	51	51
MANITOBA	29	29	29	29	28	28	24	24
MCGILL	39	38	35	35	40	40	37	37
MONTREAL	74	73	70	70	70	68	84	83
SASKATCHEWAN	16	16	18	18	19	19	17	17
TORONTO	105	105	86	86	95	95	94	94
WEST. ONT.	39	39	40	40	38	38	40	40
TOTAL	459	456	439	439	460	458	454	452

FACULTY	1992	
	No.of Grad.	NDEB Cert.
ALBERTA	51	51
B.C.	39	39
DALHOUSIE	34	34
LAVAL	40	40
MANITOBA	28	28
MCGILL	30	30
MONTREAL	80	78
SASKATCHEWAN	19	19
TORONTO	103	103
WEST. ONT.	40	40
TOTAL	464	462

THE NATIONAL DENTAL EXAMINING BOARD OF CANADA
LE BUREAU NATIONAL D'EXAMEN DENTAIRE DU CANADA

EXAMINATION DATA**NUMBER OF CANDIDATES**

EXAMINATION	1984	1985	1986	1987	1988	1989	1990	1991	1992
Written	130	155	162	174	208	215	215	229	221
Part A	94	88	93	102	127	168	177	163	166
Part B	-	-	148	133	135	150	208	133	125
Part C	106	144	80	101	120	146	142	103	116
TOTALS	330	387	483	510	590	679	742	628	628

NEW CANDIDATES

<u>YEAR</u>	<u>NUMBER</u>
1986	101
1987	138
1988	192
1989	227
1990	214
1991	186
1992	192

THE NATIONAL DENTAL EXAMINING BOARD OF CANADA
LE BUREAU NATIONAL D'EXAMEN DENTAIRE DU CANADA

GRADUATES OF USA DENTAL SCHOOLS

YEAR	EXAMINATION							
	WRITTEN		CLINICAL A		CLINICAL B		CLINICAL C	
	No. of Cand.	% Succ.	No. of Cand.	% Succ.	No. of Cand.	% Succ.	No. of Cand.	% Succ.
1986	15	93	-	-	24	38	11	64
1987	30	80	-	-	21	38	15	40
1988	40	93	-	-	33	48	41	27
1989	43	86	28	39	19	58	26	54
1990	50	86	48	44	24	46	18	56
1991	29	90	26	54	24	46	12	33
1992	23	87	16	44	12	50	9	78

THE NATIONAL DENTAL EXAMINING BOARD OF CANADA
LE BUREAU NATIONAL D'EXAMEN DENTAIRE DU CANADA

GRADUATES OF UNAPPROVED DENTAL SCHOOLS

YEAR	EXAMINATION							
	WRITTEN		CLINICAL A		CLINICAL B		CLINICAL C	
	No. of Cand.	% Succ.	No. of Cand.	% Succ.	No. of Cand.	% Succ.	No. of Cand.	% Succ.
1986	147	42	93	45	124	40	78	44
1987	143	45	102	42	109	39	86	40
1988	168	64	127	43	102	43	80	39
1989	170	56	142	65	129	38	114	33
1990	175	57	128	53	143	46	85	52
1991	198	64	137	53	109	68	91	71
1992	198	66	150	57	113	65	107	51

THE ROYAL COLLEGE OF DENTISTS OF CANADA

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1. Annual Meetings

The 1992 Annual Meeting of the Council of the RCDC was held in Calgary on Sunday, August 30th, followed by the Convocation and Annual Dinner that evening. Since the CDA's Convention will be held earlier than usual in 1993, the College has decided not to join the CDA that year, and will hold its annual functions in August in Toronto. Also planned at the same time in 1993 is a Workshop for the College's examiners.

At the 1992 Convocation, 16 new Fellows and 8 new Members were admitted to the College, bringing total numbers to 394 Fellows and 335 Members. The total number of licensed specialists in Canada is 1611. Dr. Dennis C. Smith of the University of Toronto was given an Honorary Fellowship in the College, and he provided the Convocation address.

2. Council and Chief Examiner Vacancies

Dr. Richard G. Stapleford of Windsor, Ontario, was re-elected by acclamation for a second three-year term on Council as the representative for the Oral and Maxillofacial Surgery Section, and Dr. William Fleming accepted an extension to 1994 of his appointment as Chief Examiner in the Dental Sciences. Otherwise, there were no other vacancies last year.

3. Resignation, Registrar-Secretary-Treasurer

After serving for 27 years (since the College's inception) as our Registrar and Secretary-Treasurer, Dr. John Speck has indicated that he now wishes to relinquish this post. We learned this news with great regret, as Dr. Speck has earned much respect for his dedication and integrity. It will be difficult to replace him, but he will remain until a new Registrar is named, and will participate in the 1993 Convocation ceremony.

4. Examinations

Fellowship and Membership examinations were offered in May/June and October/December, 1992, with the following results:

	<u>Fellowship</u>		<u>Membership</u>	
	<u>Pass</u>	<u>Fail</u>	<u>Pass</u>	<u>Fail</u>
Dental Sciences	2	-	-	-
Oral & Max. Surgery	6	8	-	-
Oral Radiology	1	-	1	1
Orthodontics	2	-	4	-
Pediatric Dentistry	1	-	4	-
Periodontics	-	-	3	2
	<u>12</u>	<u>8</u>	<u>12</u>	<u>3</u>

Written examinations were held in Vancouver, Edmonton, Winnipeg, Toronto, Montréal, Québec City, Halifax, Pittsburgh, and Leeds, U.K. with the orals in Vancouver and Toronto.

The College again sustained a financial loss on the examinations, but Council decided to hold examination fees at \$750 for 1993, with \$500 for re-sits and \$250 for credentials review.

5. National Certification of Specialists

Members of the College's Council noted that the CDA's Ad Hoc Committee on Certification of Dental Specialists had completed its task without there being any indication of a national and unified response to its recommendations. The College's Council decided to publish a paper giving its position on this subject and reinforcing the College's continued willingness to act as the examining agent of the licensing bodies for the purpose of specialty certification.

This paper was presented to the December meeting of the Provincial Registrars in the hope that they would take it back to their individual Board for consideration, and a copy is attached for the information of members of the CDA Board of Governors (Appendix I).

APPENDIX I

Respectfully submitted,

Guy Maranda, President
The Royal College of Dentists of Canada

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Royal College of Dentists of Canada as information.

NATIONAL CERTIFICATION OF DENTAL SPECIALISTS
AND
THE ROYAL COLLEGE OF DENTISTS OF CANADA
IN 1992

A POSITION PAPER

PREFACE

In the early 1960s the Canadian Dental Association (CDA) decided to transform its Committee on Specialists and Specialization into a more formal body by initiating an Act of Parliament to incorporate The Royal College of Dentists of Canada (RCDC). This Act received Royal assent on March 18, 1965.

MANDATE

The Act specifies that the "Objects" of the College are to:

- "(a) promote high standards of specialization in the dental profession;
- (b) set up qualifications for and provide for the recognition and designation of properly trained dental specialists;
- (c) encourage the establishment of training programs in the dental specialties in Canadian schools; and
- (d) provide for the recognition and designation of dentists who possess special qualifications in areas not recognized as specialties".

EXAMINATIONS

An examination process to grant Fellowships in the College for dental specialists was established and put into effect by the RCDC.

Fellowship in the College has always represented the highest standard of excellence in a dental specialty that can be measured in an academic clinical examination. Today Fellowship in the RCDC is recognized widely in Canada and other countries as assurance of clinical excellence in a dental specialty.

THE JOINT CERTIFICATE OF THE RCDC AND THE NATIONAL DENTAL EXAMINING BOARD (NDEB).

The Fellowship Examinations were not initially used for licensing specialists in some provinces for a variety of reasons. In an effort to facilitate the use of a national standard for specialty licensure the College co-operated with the NDEB to create a qualification that is distinct from, but lesser than, the Fellowship. This resulted in the new Membership Examination which was initiated in 1981.

Candidates who were successful in this examination entered the College as Members and received a Membership diploma. The Membership status represents clinical competence at a level consistent with specialty certification. If candidates met certain other requirements of the NDEB they received a joint NDEB/RCDC specialty certificate upon payment of a fee.

However, the requirements for specialty licensure in the provinces did not change after introduction of the joint certificate (also known as the "portability" certificate). It became apparent that the new joint certificate was neither fully portable nor serving a useful purpose. The College then informed the NDEB that it wished to withdraw from the joint certificate process.

The Membership has persisted in most specialties in part to enable candidates to be certified as specialists in those provinces that required it (see Specialty Licensing, below). This avoids a delay in certification while the candidate fulfills the more rigorous requirements for Fellowship.

SPECIALTY LICENSING

A Membership or Fellowship Diploma in the RCDC is required (among other things) by five provincial licensing authorities for certification in some specialties (Dunn, WJ, 1986 J.Canad.Dent.Assoc). Moreover they are demanded by many hospitals across the country as pre-requisites to staff appointments. It has been suggested recently by the CDA that the heads of all dental specialty training programs in Canada should possess Membership or Fellowship in the College (Resolution 90:18, CDA Interim Board of Governors Meeting, March, 1990), and it is reasonable to expect that this suggestion will become a future requirement for CDA accreditation. Therefore, the RCDC is prepared and willing to conduct specialty examinations appropriate to the high standard of specialty dental care practised in each province and territory.

3/.....

FINANCIAL STRUCTURE OF THE COLLEGE

The College administers its examinations at a financial loss. Fellows and Members in good standing pay an annual fee which sustains the activities of the College. The income from this source allows the College to maintain its activities but does not permit the accumulation of substantial financial reserves. Examiners (who are Fellows of the College) give their services voluntarily, often at inconvenience and financial loss to themselves.

The rationale for this approach is as follows:

1. Candidates take their exams early in their careers after lengthy and expensive training programs. The College wishes to minimize the financial burden on candidates at this time.
2. The College thrives on the continued loyalty and collegiality of its Members and Fellows. They share a common ideal of serving the public through identification, measurement and achievement of the highest standards of academic and clinical excellence in the dental specialties.
3. The goodwill and professional ideals of the Members and Fellows are manifested by their continuing loyalty to and support of their College. This has managed to keep the College financially independent and permitted it to set standards to enhance and assess academic and clinical knowledge, without interference and at arm's length from the political bodies of organized dentistry. However, having said this we would ultimately like to see the College's finances improved by increased use of our examinations so that the examiners could be paid for the time that they give in the preparation, administration and grading of the examinations.

CURRENT POSITION OF THE RCDC

The College believes, with its experience of 27 years and in keeping with the 1965 Act, that a national level of certification of all dental specialists is both desirable and attainable. It maintains as its objective the development of the type of recognition that exists between the Royal College of Physicians and Surgeons of Canada and the provincial medical licensing bodies.

The RCDC has the only existing mechanism to administer national dental specialty examinations that could serve the individual needs of the provincial and territorial dental licensing bodies without compromising their authority.

4/.....

The College is an autonomous body operating under a Federal Act. It has access to a large pool of qualified and experienced examiners from across Canada, many with University appointments. The examinations are fair, valid assessments of knowledge and skill and are held in English or French. It is through this process of arm's length evaluation that a high and uniform standard of dental specialty care will be assured for all Canadian residents in every province and territory.

OTHER CONSIDERATIONS

(i) Examination Process

The RCDC has an ongoing process for reviewing the examination procedures in each specialty. They were reviewed at a week-end workshop in 1990 with all of the examiners, some of whom are heads of specialty training programs, and the NDEB. Professional educators with doctorates in the examination process (psychometrics) contributed to this workshop and documented the final recommendations. The result has been a modification of the oral examinations to conform to modern methods of evaluating clinical competence and judgement at the level of specialty practice. The College's policy is to maintain the highest standards of its evaluation process.

(ii) Relationship of RCDC with Provincial Licensing Authorities

The RCDC can make its examination process available to help the provincial licensing authorities examine specialists. This would not preclude the right of any province to supplement the RCDC examination(s) with its own process of evaluation, e.g., The College of Dental Surgeons of B.C. may insist on the need to conduct an additional clinical examination, but it may be willing to use the Membership Examination as a replacement for the written part of the examinations currently used.

CONCLUSIONS

- The RCDC is a CDA-created autonomous body operating under a Federal Act which would not be required to be changed to accommodate a new financial structure and accountability.
- The Council of the RCDC offers its examinations as the basis for provincial and territorial dental specialty qualifications.

CANADIAN ACADEMY OF ENDODONTICS

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1. Annual Report

In 1992, the Executive of the C.A.E. met in Toronto on January 19, 1992, and in Victoria, B.C. on September 16, 1992. The 28th Annual Meeting of the C.A.E. was held at the Laurel Point Inn, Victoria, September 16-21, 1992. The keynote speaker was Dr. Ralph Bellizzi who spoke on surgical endodontics. There were 69 attendees and 38 spouses at the meeting. A list of the new Executive follows:

2. Slate of Officers 1992-1993

President:	Wayne Acheson, Winnipeg
President Elect:	Wayne Pulver, Toronto
Treasurer:	Paul Teplitsky, Saskatoon
Executive Secretary:	Steve Brayton, Halifax
Constitution:	Terry Smorang, Calgary
Past-President:	Sharma Sinanan, Vancouver

Respectfully submitted,

Stephan M. Brayton
Executive Secretary
Canadian Academy of Endodontics

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Academy of Endodontics as information.

CANADIAN ASSOCIATION OF ORTHODONTISTS

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

The Canadian Association of Orthodontists had its 43rd Annual Scientific Meeting in Clagary, Alberta. The President, Dr. Terry Carlisle of Edmonton presided.

1. We have presented Distinguished Service awards to Dr. Doug Eisner (Halifax). The 1992 Award of Merit was presented to Dr. Jean-Louis Ares (Edmonton) in Calgary.
2. Our efforts at soliciting for our Canadian Foundation for the Advancement of Orthodontics (CFAO) fund are now in a process of re-organization to attempt a more sophisticated approach with a view to improving our efforts at increasing donations. Dr. Lee Erikson (Halifax) and Dr. Yal Malkin (Vancouver) are pursuing a new program to increase membership support for our research foundation, and so far they have shown great success.
3. Our 1993 Annual Scientific Meeting will be a combined meeting with the Great Lakes Association of Orthodontists to be held in Palm Desert California in the month of September. (The Grieve lecturer will be Dr. Eugene Roberts (University of Indiana) on April 29th in Toronto).
4. The C.A.O. has answered each request, by the C.D.A., for comments on several briefs: Ethics, Coding and Sponsor Approval. Although we have spent considerable time and effort at these tasks, we are somewhat uncertain at how seriously our suggestions are taken.
5. Dr. Terry Carlyle (Edmonton) prepared an outstandingly comprehensive manual for our membership. The manual outlines all the services as an excellent aid for new and present members. It discusses such matters as insurance forms, GST and infection control as they apply to our particular specialty and it will be updated regularly.
6. Dr. John Kalbfleisch (Mississauga) and Dr. Michael Wainwright (Vancouver) continue to revise our proposed strategic planning. This effort has been tailored along the lines of the American Association of Orthodontists. Both short and long term objectives are being reviewed.
7. We continue to pursue a public relations program but on a provincial level. We have also managed to have some cooperation from the American system of information to aid in our efforts on public relations. This year, in Ontario, we have scheduled 12 radio interviews in a 5 week period. These efforts are all addressed in a positive

manner directed only as an information service to the public. The interviews are heard on stations throughout the province. We anticipate TV coverage at a later date.

8. We continue to be vitally interested in the actions of the RCDC and the NDEB as they pertain to specialty certification. We are delighted that Dr. Oleg Kopytov, who has intimate knowledge of such matters, serves as a CDA governor. There have been several discussions concerning the C.D.A.'s recent change of position in regard to the dismantling of the specialist committee in favour of having only the president of every specialty group attending meetings.
9. Membership: Our membership continues to grow and the following are our current numbers (August 1992).

a) Active members	427
b) Life Members	40
c) Retired Members	12
d) Honorary Members	7
e) Student Members	<u>25</u>
	511
10. New Executive for 1992-93:

President:	Dr. Michel Farmer (Pointe Claire)
President Elect:	Dr. Michael Wainwright (Vancouver)
Past President:	Dr. Terry Carlyle (Edmonton)
First Vice President:	Dr. Lee Erickson (Halifax)
Second Vice President:	Dr. John Kalbfleisch (Mississauga)
11. Dr. Michael Wainwright, our president elect, with the help of Dr. John Hardie, from Vancouver, have worked on an Infection Control recommendation manual that will apply more specifically to our specialty.

Respectfully submitted,

Michel Farmer, President
Canadian Association of Orthodontists

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Association of Orthodontists as information.

CANADIAN SOCIETY OF PUBLIC HEALTH DENTISTS

REPORT TO THE 1993 INTERIM MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1992 Annual Report

The Canadian Society of Public Health Dentists held a one half day Annual Business Meeting and one day Scientific Session at the Palliser Hotel in Calgary, Alberta on 30 and 31 August 1992, in conjunction with the Canadian Dental Association Convention.

At the Scientific Session, Dr. Christopher Clark of the University of British Columbia lead a review on the Canadian Conference on the Evaluation of Recommendations Concerning Fluoride that occurred in Toronto in April 1992. In addition, he presented a paper on Caries and the Elderly Adult. Dr. Roger Ellis, the Registrar for the Royal College of Dental Surgeons of Ontario, spoke on the Impact of Changing Legislation for the Protection of the Public and Dr. James Leake from the University of Toronto and the City of North York Dental Department.

At the business meeting, the following was discussed. The Canadian Society of Public Health Dentists is concerned that the position of Senior Dental Consultant with the Federal Government remains unfilled and there appears to be no intention of filling it. The Canadian Society of Public Health Dentists will be more proactive in attempting to have the position filled.

The Canadian Society of Public Health Dentists continues to offer strong support for a National Dental Epidemiology Project.

The Canadian Society of Public Health Dentists is concerned that after two years of effort by many dental professionals and others, the document Oral Health in Canada: Facing the Future would not be published due to a decision by the Federal Government.

The Canadian Society of Public Health Dentists has once again looked at opening its membership to non dentists. Two subcommittees are to prepare proposals for voting on at the 1993 Annual Meeting so a final decision can be made on this topic.

Unfortunately, the Canadian Society of Public Health Dentists must report that its membership continues to shrink and noted the recent elimination of the senior dental consultant position in New Brunswick.

Respectfully submitted,

Neil A. Farrell, D.D.S. D.D.P.H.
President
Canadian Society of Public Health Dentists

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Society of Public Health Dentists as information.

CANADIAN DENTAL ASSOCIATION
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Secretary to the Board of Governors

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W. MacNeil
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B. MacNeil
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DU BUREAU DES GOUVERNEURS

L'ASSOCIATION DENTAIRE CANADIENNE

OTTAWA, ONTARIO

SEPTEMBER 10-11
LES 10 ET 11 SEPTEMBRE

1993

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BOARD OF GOVERNORS
OFFICERS & OFFICIALS**

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J. Wright	Canadian Dental Service Plans Inc.
J. Zapp	American Dental Association
G. Zwicker	Canadian Dental Service Plans Inc.

PRESIDENT'S SPEECH
Annual Meeting of the CDA Board of Governors
September 10, 1993

Good morning, ladies and gentlemen and welcome.
Bonjour et bienvenue à toutes et à tous.

As always, this has been a busy year for CDA and its President. All of the issues that are presently on CDA's plate are covered in one form or another in the board book that will occupy us for today and tomorrow. What I would like to do in these remarks is report to you on the principal goals that were established for the last twelve months and then take a little look into the future.

L'ADC et son président ont connu, comme par le passé, une année fort occupée. Le cahier sur lequel nous allons nous pencher aujourd'hui et demain contient tous les sujets qui se retrouvent, d'une façon ou d'une autre, sur la table de travail de l'association. J'aimerais, dans mes propos d'ouverture, faire état des principaux buts que nous nous étions fixés pour les douze derniers mois, puis jeter un regard sur l'avenir.

There were three areas of concern that I identified would be the focus for 1992-93. These areas were membership, fiscal matters and team building within CDA.

J'ai retenu trois secteurs sur lesquels nous devons, à mon avis, concentrer nos efforts pour 1992-1993, à savoir: les effectifs, les problèmes financiers et le développement de l'esprit d'équipe au sein de l'ADC.

Starting with the second two items, we have an essentially good news report. As you know from your assiduous study of your board books, we enjoyed approximately a \$200,000 surplus in 1992. Our intrepid President-elect, Ray "numbers" Wenn, will have more to say about that later this morning when the Management report is presented. Furthermore, it looks like we are on the right track for this fiscal year as well. I should remind you that at this time last year we reported that we would need five years of surplus to get our operating reserves back to where they should be. So far, so good.

At tonight's festivities I will make some remarks about my year as President, but certainly one of the most gratifying aspects of this past twelve months has been the wonderful opportunity to watch the great results that flowed from the melding of talents of Executive Council, committees and our staff. Many of you have made positive comments to me about the team building aspect of this past year and I thank you all for both your comments and your efforts.

.../2

And now to the third item, membership. Membership, I believe continues to be the key issue for this association. The so-called mandatory provinces are misnamed. These eight provinces choose to join CDA, but they do so on a group basis whereby when the decision to join is made, all the licensed dentists in that province are required to pay their membership fee to their association and it is then remitted to the CDA.

N'oublions pas, cependant, que c'est une question de choix et que l'ADC doit continuer de travailler et de se mériter la faveur et l'adhésion collective de cette province en particulier.

But let's not forget that a choice is made and that CDA must continue to work and earn that favourable decision for that particular province to join as a group.

Le cœur du problème se situe, comme nous le savons, dans les provinces d'Ontario et de Québec, dont les lois ne permettent pas la décision ni l'adhésion collective. Cette année, nous mettrons, de façon absolue, un frein à la baisse des effectifs en Ontario. Nous atteindrons ainsi l'objectif que nous nous étions fixé d'y compter plus de membres que l'an dernier. La baisse des effectifs se poursuit cependant au Québec et on note toujours un glissement des adhésions individuelles en Ontario. Ce sont là deux défis que devront relever nos campagnes de recrutement et sur lesquels se penche d'ailleurs déjà le groupe de travail sur les adhésions.

The crux of our membership problem as we know, is in the provinces of Ontario and Québec where provincial legislation does not allow for group decision and group membership. This year we will achieve a stop in the slide of numbers in Ontario in absolute terms. That is, our goal of achieving more members in Ontario this year than we had last year will have been met. But the slide continues in Québec and we are still slipping in terms of percentage of dentists in Ontario who choose to join CDA as individuals. These areas will be the next challenges to address in our membership campaigns and in fact are being looked at by the working group on membership.

Nous devons quand même nous pencher sur ce que nous avons toujours appelé la campagne de recrutement en Ontario et au Québec.

But we have to look at what we have traditionally called our membership campaigns in Ontario and Québec. This year, we took the first steps to break the mould of how we have been addressing membership, and frankly, failing to increase our membership. It has been frustrating because so many of us feel that CDA is doing an excellent job in addressing its mission. We are handling the issues well. Our fiscal house is in order. We have been getting out to local societies and corporate members. The list of achievements goes on the but the question is, why are we having so much trouble getting and retaining members?

There are some problems that are fundamental in nature and some that are more simple. Fundamentally this association was not constituted to deal with a situation where the choice

of membership is done on an individual by individual basis. In the last six years, we have succeeded in making communications our first priority and we are getting good at it. The Journal, Communiqué, presidential letters, communications to corporate members have all come a long way.

Unfortunately, during these six years, we have coincidentally run into a real attitude change in individual dentists, especially the younger ones coming into the profession. There seems to be a real me-first and devil take the hindmost type of attitude. Therefore all the good works seem to be negated by what is almost a societal change.

Hélas, nous avons par contre, au cours de ces six années, assisté à un changement réel d'attitude chez les dentistes, pris individuellement, surtout chez les jeunes qui entrent dans la profession. Une attitude du type «sauve qui peut» s'est apparemment développée, comme si quelque chose constituant presque une évolution sociale réduisait à rien tout le bien qui a été fait.

The next step has to be for us to ask ourselves where we bring to bear these effective tools that we've developed. Obviously the place where these two coincide and meet is in our membership department. Membership is what it's all about. This past year, we have had the benefit of a Manager of Membership Services, and I don't believe that it is any coincidence that this is also the first year that we have seen a positive turnaround in membership numbers in Ontario. I look forward to the discussion that will take place at this Board tomorrow on the material from the Working Group on Membership concerns and the subsequent recommendations from that group.

Obviously, as there always is, there was a lot to do in this past year that made it so enjoyable. The work and responsibilities to be tackled and accomplished, as well as the chance to serve the profession and have some say in its affairs made this a very rewarding year. But as every President invariably tells you, the highlight of the year is the travel and the opportunities to visit with corporate and individual members as well as to meet new people and solidify old friendships. But the perspectives developed in dealing with day to day responsibility, as well as the perspectives inherent in national and international travel within the world of dentistry, have given some opportunity for reflection as to where we are going in this profession of ours. I'd like to share a few of these thoughts with you.

Many of you have heard me say at your provincial meetings that, relative to other sectors of our economy, and other professions, dentistry has come through the economic storms of the last three to four years in relatively good shape. Please appreciate that I'm not saying that dentists have prospered mightily or have made a financial killing in the past few years. Just that compared to many other segments of the economy we're not in bad shape. Of course this situation varies across the country with some regions doing better than others. But by and large I believe it to be true. Teeth have not gone the way of North Atlantic cod.

Well, now we are well into the era of reaping the winds of the economic hard times that have been sowed in the first half of this decade. As usual governments were slow to react to decreased tax revenue and enormously increased social benefit expenditures. Debts of all levels of Canadian government have soared and they have soared to such an extent that even socialist governments who believe in debt financing are scared witless (or shall we say half-witless).

Et encore, comme d'habitude, les gouvernements ont une réaction excessive ou, plus précisément, ils réagissent sans plan et sans réflexion. La vogue actuelle porte sur l'élimination du déficit et la réduction des programmes. Contribuable important de Revenue Canada et du Trésor de l'Ontario, je suis bien en faveur; mais, comme professionnel de la sante, je ne puis que hocher la tête et reprendre mes propos de tantot quand je parlais de «peur à moitié folle.»

And again as usual, governments are overreacting or more accurately, acting in a piecemeal ill-thought-out manner. The flavour of the month is elimination of the deficit and program reduction. As a substantial contributor to Revenue Canada and the Treasurer of Ontario I'm all for it, but as a health care professional I can only shake my head and think back to my earlier comment of being scared half-witless. I think that most of us involved in the health care delivery system in Canada have been aware for quite a while that the health care system that our politicians tout and continue to tout as bringing the best health care in the world to every Canadian, is no longer fulfilling that mandate. Defacto rationing has been around for a while, whether it be reflected in long waiting lists for diagnosis and treatment or restricted access to some therapies.

But just as dentistry escaped the worst of the recession/depression, we have thus far escaped the worst of government mismanagement of medicare. That is certainly not true for the hospital and physician sector of the health care system. Why it is true for us is simply because our exposure to publicly funded programs is by and large minimal, with the great majority of dentists' revenue flowing from the private sector. That is not likely to change, but what I do see happening is financially desperate governments firing shotgun shells at their health care systems, where well thought out precise surgery is called for. The effect on dentistry I think will be the creation of a climate of pressure for dentistry. Our medical colleagues are taking enormous political heat, and are agreeing to deals with their provincial governments that would have been unthought of even two or three years ago.

One result may be that dentists' incomes will soon be moving into the number one spot in Statistics Canada Annual Report. That is going to put us into the limelight, a limelight that we don't particularly want, and expose us to heat that we don't particularly need.

Concomitant with this thrust into an undesirable spotlight will be increased pressures to moderate our fees. While I personally believe we must look at this area, it will best be done without undue external pressure.

Another area I view with trepidation are the directions given to health professionals in Ontario and B.C. to formulate standards of care practice. This is a typical shotgun blast where the target is the placement of limits on tests and procedures rendered by physicians and hospitals. But a few of those shotgun pellets will hit us and the results will be that these so called standards of practice would become a formula for the third party carriers to limit benefits, and look for defacto guarantees of treatments rendered by dentists. I would strongly recommend that standards of practice demanded by provincial governments become an issue that are formulated nationally in dentistry, for the usual obvious reasons. Variance in standards of practice from province to province will make dentistry vulnerable to accusations of being uncoordinated; it will make governments and third party carriers capable of dividing us and perhaps conquering us.

Will we weather this new storm? I think so, but it will take our traditional farsightedness, and reliance on our strong organizational base.

Saurons-nous tenir le coup une autre fois? Je le crois; mais nous devons comme d'habitude faire preuve de clairvoyance et compter sur la force de notre organisation a la base.

Et voilà ce qui en est des réflexions d'un président qui quittera bientôt son poste.

So much for the musings of a very-soon-to-be past president.

One wag once said that a speech is like a love affair, easy to get into and difficult to get out of. I am going to exit from this one by repeating what I said earlier. This has been a wonderful year and the work accomplished is reflected in the Annual Meeting board book.

Et maintenant, sous la direction du Président de l'assemblée, voyons ce que nous reserve notre cahier de travail.

I invite you, under our Chairman's direction, to turn our attention to it now.

Bernard H. Dolansky, B.A., D.D.S., M.S.
President

EXECUTIVE COUNCIL

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

- Members:** Dr. Bernard Dolansky, Ottawa - Chairman
Dr. Raymond Wenn, Charlottetown
Dr. Bryun Sigfstead, Edmonton
Dr. Jim Brookfield, Kirkland Lake
Dr. John Diggins, Vancouver
Dr. Barry Dolman, Montréal
Dr. Toby Gushue, St. John's
Dr. Richard Sandilands, Edmonton
Dr. Bernie White, Saskatoon
- Senior Staff:** Mr. Jardine Neilson, Executive Director
Mrs. Sandra Davis, Manager - Executive Services
- Coordinator:** Mrs. Suzanne Burton

1. **Council Meetings**

Since the 1993 Interim Meeting of the Board of Governors, the Executive Council has met once, on June 17-18, 1993.

ITEMS REQUIRING BOARD ACTION

2. **Appointment of CDA Auditors**

RESOLVED:

- 93.34 **THAT the firm of McCay, Duff and Company be appointed CDA auditors for the fiscal year 1993.**

ADOPTED

3. **CDSPI - Council on Insurance and Investment**

To comply with Article XVI, Section 4(b) of the CDA Constitution and By-Laws,

RESOLVED:

- 93.35 **THAT the Board of Directors of CDSPI be appointed the CDA Council on Insurance and Investment for the calendar year 1994.**

ADOPTED

4. Canadian Dentists' Insurance Program - 1992 Financial Statements

RESOLVED:

- 93.36 THAT the Audited Financial Statements for the Canadian Dentists' Insurance Program for the year ending December 31, 1992, be approved.

APPENDIX I

ADOPTED

5. FDI National Treasurer

RESOLVED:

- 93.37 THAT Mr. Jardine Neilson, CDA Executive Director, be appointed FDI National Treasurer for 1994.

ADOPTED

Executive Council is pleased to note Mr. Neilson's nomination as the North American Regional Representative on FDI Council, supported by delegates of the American Dental Association and CDA. Elections will be held during General Assembly B in Göteborg. The Board of Governors extended congratulations to Mr. Neilson on his appointment.

6. Amalgamation of Fund Administration - CDA Charities

At the 1993 Interim Meeting, Governors were informed that Management Committee had approved in principle the concept of amalgamation of fund administration for CDA charities under a new identity for the umbrella organization - Dentistry Canada Fund (DCF).

Executive Council reviewed a report entitled "Merging of Charitable Entities Within CDA" which is a joint proposal from the Canadian Dental Foundation (CDF) and the Canadian Fund for Dental Education (CFDE).

APPENDIX II

RESOLVED:

93.38 THAT the proposed merger, as outlined in Appendix II, of the existing Canadian Dental Foundation (CDF), the Canadian Fund for Dental Education (CFDE), the Canadian Dental Research Foundation (CDRF), the Sydney Wood Bradley Memorial Library Trust Fund, and the Grieve Memorial Lectureship Trust, under the suggested name "Dentistry Canada Fund" be approved; and,

THAT any By-Law implications involved in such a merger be identified, and By-Laws for the new fundraising entity (DCF) be developed and brought before the Board of Governors for approval.

ADOPTED

7. Terms of Reference - Committee on Community and Institutional Dentistry

Governors directed Executive Council to review the terms of reference for the Committee on Community and Institutional Dentistry to determine whether a specific reference was advisable for the purpose of identifying the Committee's responsibilities for professional resource utilization.

RESOLVED:

93.39 THAT the revised Terms of Reference of the Committee on Community and Institutional Dentistry be approved as appended.

ADOPTED**APPENDIX III**

The Board of Governors directs that Executive Council consider additional representation of dental auxiliaries on the Committee.

8. Disposition of Proceeds - Settlement with the Imperial Life Assurance Company of Canada

At the 1993 Interim Meeting, Governors were informed that a letter of agreement which confirms the terms of the settlement arrangements, and a process of dismissal,

on consent, of all court proceedings brought in connection with outstanding issues between Imperial Life and CDA/CDSPI had been signed by Laurentian Imperial, CDA and CDSPI. Acting on its responsibilities as CDA's Council on Insurance and Investment, CDSPI presented a proposal to Executive Council for the disposition of settlement proceeds. The following motions were approved by the Executive Council at its June Meeting, and are presented for Board ratification.

RESOLVED:**93.40****WHEREAS:**

- A) An agreement, a copy of which is attached as Schedule A to these minutes (the "Agreement") has been entered into between the CDA and The Imperial Life Assurance Company of Canada ("Imperial"), settling the outstanding claims arising from the CDA's change of carriers for the life and disability insurance plans of the Canadian Dentists' Insurance Program made as of January 1, 1989;
- B) CDSPI has proposed that the proceeds of the settlement be applied in the manner outlined in a memorandum dated April 15, 1993, a copy of which is attached as Schedule B to these minutes, and the CDA Executive Council wishes to accept the proposal and proceed with its implementation;

NOW THEREFORE BE IT RESOLVED THAT:

- 1. The waiver of premium reserves released by The Prudential Assurance Company Limited ("Prudential"), in respect of the Waiver Claimants described in paragraph 5 of the Agreement, be applied in the following manner:
 - (i) \$243,757 shall be used to repay the Prudential loan to the CDIP life insurance plan surplus account; and
 - (ii) the balance (\$537,243) shall be transferred to the CDIP life insurance plan surplus account.
- 2. The balance of the life insurance plan surplus funds held by Imperial as of December 31, 1992 and released pursuant to the Agreement shall be deposited in the CDIP life insurance plan surplus account and designated as "Imperial Life Plan Experience Surplus."

3. The sum of \$650,000 paid by Imperial in settlement of the actions brought by the CDA against Imperial in respect of four long term disability insurance claims shall be deposited in the CDIP disability insurance plans surplus account and applied to the repayment of the loan made to the disability insurance plans from the CDIP life insurance plan surplus account to finance payment of certain long term disability insurance claims denied by Imperial and paid by CDIP through special arrangements authorized by the CDA.
4. CDSPI is hereby directed to proceed with the implementation of this resolution and is hereby authorized to give Prudential the directions required for this purpose.

ADOPTED

The reference documents, schedules A and B are appended for the Board's review.

APPENDIX IV**9. CDIP Surplus**

Section 9 of the Participation Agreement requires Executive Council to receive and review recommendations from the Council on Insurance and Investment on the use of surplus funds as soon as reasonably possible, following receipt of the CDIP audited financial statements.

The Executive Council agreed with the recommendation on this matter contained in the report of the Council on Insurance and Investment, and presents it for Board ratification.

RESOLVED:

- 93.41 **THAT**, even though the 1992 operations of the CDIP Life and Office Overhead plans produced a surplus balance at the year end, in light of the current litigation and appeal in process, no action, distribution or use of any funds should take place until these legal issues are resolved.

ADOPTED

This recommendation is in keeping with a prior decision of the Executive Council. Following the resolution of legal issues, the Participation Agreement will require thorough review and potential revision based on the findings of the courts.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION**10. Appeal of the Judgment of the Honourable Mr. Justice McKeown**

Executive Council has instructed Mr. Claude Thomson, a Senior Counsel at Fasken Campbell Godfrey to argue its appeal of the judgement of the Honourable Mr. Justice McKeown at the Court of Appeal. The Executive Council reviewed CDA's Factum and was informed that Fasken Campbell Godfrey were successful in obtaining an order from the Court to have the Appeal expedited. The Appeal is set to be heard on October 25-26, 1993.

On the matter of costs related to the application to the Ontario Court of Justice, Commercial Court, Justice McKeown found that the QDSA and CDA were not entitled to their costs. The QDSA has filed an application for a leave to appeal that decision. The Court of Appeal has determined that leave should be argued at the same time as the appeal is heard.

Dr. Barry Dolman, the Executive Council member from Québec, was excused from discussion of all matters surrounding the ongoing legal actions. This action was taken for Dr. Dolman's protection in the event of a conflict of interest between his responsibilities to CDA and QDSA.

11. Remuneration of Observers - CDSPI Board

The CDSPI Board of Directors will consider the matter of remuneration of observers to the CDSPI Board at its September meeting. Correspondence has been received from various Corporate Members on this subject, and it was considered by the Executive Council. As well, Council reviewed comment from General Counsel to CDSPI on responsibilities and liabilities of voting members and observers to the CDSPI Board.

CDA has instructed its CDSPI Board representatives to support the position of equitable remuneration for observers and voting members. CDA supports the position that this action should not increase the overall per diem expenditure, but rather involve a distribution of the budget allocation equally among those who serve on the CDSPI Board.

Although the history of this issue was briefly reviewed by the Executive Council, Council's decision was based on the merits of the circumstances as they presently exist. Council also noted that the plan to restructure the CDSPI Board could involve further changes relating to the current director/observer status. Further information on the restructuring is contained in the report of the Council on Insurance and Investment.

12. Catastrophic Coverage

In its review of CDIP Plans, CDSPI noted that there was a need for catastrophic coverage under the life plan. This coverage would provide protection for any large loss of life in one incident, so that there would only be a maximum charge to the plan. The Board of Directors of CDSPI indicated an immediate need for this coverage which was discussed at the May 14th meeting between CDA and CDSPI Management Committees. CDA Management Committee approved a recommendation for the purchase of this coverage on behalf of the Executive Council and the Board of Governors. A motion to ratify the action of Management Committee is presented in the report of the Council on Insurance and Investment.

13. CDIP Life and Disability Insurance Trust Statements

Executive Council reviewed an analysis of Life and Disability Insurance Trust Statements - January 1, 1992 to December 31, 1992. The figures presented were audited by Towers Perrin. Detailed notes on the analysis were provided for the information of Executive Council. Council also received the 1992 National Experience and Statistical Report for CDIP, following its approval by the CDSPI Board in April, 1993.

14. Ontario Sales Tax - CDIP Plans

CDSPI informed Executive Council that the Ontario Government's plans to tax group insurance policies may have serious consequences for CDIP. Of particular concern is the fact that only group insurance plans would be affected, thus giving a significant rate advantage to other insurance plans. CDSPI will pursue its lobby efforts in this regard. Executive Council has urged caution given the importance and sensitivity of current discussions between the ODA and the Ontario Government on matters which also have serious consequences for the profession.

15. **Working Group on Membership Concerns**

At the 1993 Interim Meeting, Governors approved a recommendation from the Executive Council to establish a CDA Working Group on Membership Concerns. Executive Council reviewed minutes of the first meeting of the Working Group held May 21, 1993 and directed that they serve as an Interim report to Governors. They are contained in this resource book for Governors' review and comment. Time will be scheduled during question period for Governors' input. A further meeting is scheduled for September and appropriate recommendations will be brought forth to Governors for consideration.

16. **Guidelines for Companies Seeking CDA Program Endorsement**

Draft guidelines for companies seeking CDA program endorsement have been prepared. The guidelines will be reviewed by the Communications Steering Committee at its September Meeting. The Committee will present any recommendations forthcoming to Governors at the 1994 Interim Meeting.

17. **Direct Importation and Regulation of Dental Products**

The report of the Committee on Dental Materials and Devices has identified a concern regarding direct importation and regulation of dental products. The concern relates to product companies which do not observe the Canadian guidelines for regulation. Executive Council expressed a concern with actions taken by companies which appear to purposely circumvent Workplace Hazardous Materials Information System (WHIMIS) regulations, and discussed how they should be dealt with by promotional vehicles, including the Journal and Annual Dental Meeting. The facts concerning this issue will be developed and a draft paper prepared for the consideration of Executive Council at its next meeting.

18. **Mexican Dental Association (MDA)**

The Mexican Dental Association has initiated communication with CDA and ADA concerning the North American Free Trade Agreement (NAFTA). This matter was discussed at the joint meeting between CDA/ADA Executives early in 1993, and the response to the MDA is appended.

APPENDIX V

As indicated, expenditure of Association resources in this area is of concern to CDA and ADA. Involvement will be managed with this particular concern in mind. It is anticipated that future Canadian involvement will involve input from the Commission on Dental Accreditation of Canada.

19. Honors and Awards

- Honorary Membership

The Annual nominations for honorary membership were reviewed by the Executive Council, along with recommendations from the Committee on Nominations, Awards and Trusts. No Honorary Memberships in the Canadian Dental Association have been awarded in 1993.

- Distinguished Service Award

Nominations for the Distinguished Service Award and recommendations from the Committee on Nominations, Awards and Trusts were reviewed by the Executive Council. The Distinguished Service Award has been granted to Dr. Mel Charendoff of North York, Ontario, Dr. John Robertson of Summerside, PEI and Dr. Harry Rosen of Montreal, Quebec.

- CDA Award of Merit

The Award of Merit has been granted to Brigadier General J. Fred Begin of Ottawa, Ontario, Dr. Allen MacLean of Summerside, PEI, Dr. John Speck of North York, Ontario and Dr. Robert Turnbull of Toronto, Ontario.

- Certificate of Merit/Letter of Appreciation

Certificates of Merit have been awarded to:

Dr. Micheline Blain of Montreal, Quebec
Ms. Carol Clemenhagen of Ottawa, Ontario
Mr. Cyril Gallant of Mississauga, Ontario
Dr. William Glave of Aurora, Ontario
Dr. Jack Gryfe of Weston, Ontario
Dr. Pat Johnson of Willowdale, Ontario
Dr. Kerim Ozcan of Windsor, Ontario
Dr. David Precious of Halifax, Nova Scotia
Dr. Brian Rocky of Vancouver, B.C.
Dr. Wayne Steggle of Smiths Falls, Ontario
Reverend Rondo Thomas of Scarborough, Ontario

Letters of Appreciation from the CDA President have been forwarded to:

Dr. Roger Bailey of Victoria, B.C.
Dr. Mac Balfour of Oakville, Ontario
Dr. William Bedford of Ottawa, Ontario
Dr. Ralph Brooke of London, Ontario
Dr. Deborah Cooper-Lall of Calgary, Alberta
Dr. Don MacFarlane of Vancouver, B.C.
Dr. Karim Nanji of Thornhill, Ontario
Dr. E.H. Yen of Winnipeg, Manitoba

Further information is contained in the report of the Committee on Nominations, Awards and Trusts. The Awards/Dentsply Student Clinicians' Luncheon will be held in conjunction with the Annual Meeting on Friday, September 10, 1993.

The Executive Council extends sincere congratulations to all 1993 recipients of honours and awards.

20. **Canadian Dental Hygienists' Association/Canadian Dental Association**

A meeting has taken place between senior staff of the Canadian Dental Hygienists' Association (CDHA) and CDA for the purpose of discussing and identifying issues where there may be differences and concerns. It is anticipated that this will be followed by a meeting between the Presidents of both organizations. CDA is optimistic that the lines of communication among all national organizations representing integral parts of the dental team will remain open.

21. **1994 Annual Meeting - Vancouver, B.C.**

The 1994 Annual Meeting of the CDA Board of Governors will be held on Sunday, October 2nd. The President's Installation Dinner will take place on Saturday evening, October 1st. This scheduled is necessitated by activities and events surrounding FDI Congress 1994. Further scheduling information will be provided as it becomes available.

22. **Review of Council/Committee Chairpersons and Executive Liaisons**

At the Executive Council Meeting immediately following each Annual Meeting of the CDA Board of Governors, presidential appointments of Council/Committee Chairpersons and Executive Liaisons are made. A list of current Council/Committee Chairpersons and Executive Liaisons was reviewed by Executive Council, and appropriate input was provided for consideration with regard to appointments for 1993-94.

23. President's Activities

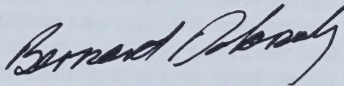
The schedule of the activities of the President to date is appended for information.

APPENDIX VI

24. Council/Commission/Committee Reports

Executive Council has reviewed Council/Commission/Committee reports as appended, and other matters requiring Board action follow therein.

Respectfully submitted,



Bernard Dolansky, B.A., D.D.S., M.S.
Chairman, Executive Council

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Executive Council.

Canadian Dentists' Insurance Program ("CDIP")

COMMENTS ON FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 1992

Our following comments on the financial statements, while not exhaustive, may be of interest and assistance to you. It should be noted that these financial statements are for the administration of the insurance program only and do not include information in connection with the plan surplus and reserves, accounting for which is provided by the actuaries.

AUDITORS' REPORT (page 1)

- An unqualified audit report has been issued on the CDIP financial statements.

BALANCE SHEET (page 2)

- Cash and short-term investment have increased by \$5,756,110 when compared to 1991. These monies represent 1993 insurance premiums collected in advance from members. In 1991, there was a delay in billing to the members due to the change in carriers.
- Deferred income being premiums received from members in advance of due date is higher by \$5,268,865 when compared to 1991 for the same reason as stated above.
- Accounts receivable are minor adjustments and amounts due from dentists for billings rendered.
- Accounts payable are to CDSPI for their fees not withdrawn at year end as well as GST payable to Revenue Canada.
- Premiums payable are amounts due to insurance company for amounts collected from dentists at year end.

STATEMENT OF OPERATIONS (page 3)

- All premiums have increased substantially when compared to last year. This is as a result of increase in costs except for malpractice and personal umbrella liability which increase is as a result of increased participation.
- Collection and administration fee to CDSPI represent 15% of premiums paid to insurers as per the administration agreement.

STATEMENT OF CHANGES IN FINANCIAL POSITION (page 4)

- This statement shows the actual cash flows of the CDIP activity and reconciles to the cash and short-term investment at the end of the year.

NOTE TO FINANCIAL STATEMENTS (page 5)

- The notes are self-explanatory.

**CANADIAN DENTISTS'
INSURANCE PROGRAM
FINANCIAL STATEMENTS**

Years Ended December 31, 1992 and 1991

Auditors' Report	Page 1
Balance Sheet	2
Statement of Operations	3
Statement of Changes in Financial Position	4
Notes to the Financial Statements	5

Clarke
Henning
& Co.

10 Bay Street, Suite 801
Toronto, Ontario
Canada M5J 2R8
Tel: (416) 364-4421
Fax: (416) 367-8032

AUDITORS' REPORT

TO THE BOARD OF GOVERNORS OF CANADIAN DENTAL ASSOCIATION

We have audited the balance sheet of Canadian Dentists' Insurance Program as at December 31, 1992 and 1991 and the statements of operations and changes in financial position for the years then ended. These financial statements are the responsibility of the Program's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Program as at December 31, 1992 and 1991 and the results of its operations and the changes in its financial position for the years then ended in accordance with generally accepted accounting principles.

Clarke Henning & Co.
CHARTERED ACCOUNTANTS

Toronto, Ontario
February 5, 1993

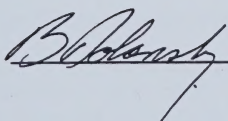
CANADIAN DENTISTS' INSURANCE PROGRAM

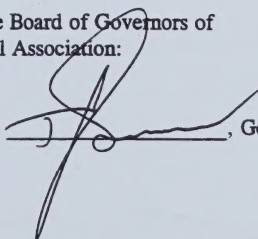
BALANCE SHEET

As at December 31, 1992 and 1991

	1992	1991
ASSETS		
Cash and short term investment	\$ 6,852,985	\$ 1,096,874
Sundry amounts receivable	11,454	16,781
	<u>6,864,439</u>	<u>1,113,655</u>
LIABILITIES		
Deferred income (premiums received from members in advance of due date)	6,354,810	1,085,945
Premiums payable	361,020	17,795
Accounts payable	148,609	9,915
	<u>\$ 6,864,439</u>	<u>\$ 1,113,655</u>

Approved on behalf of the Board of Governors of
Canadian Dental Association:

 Governor

 Governor

CANADIAN DENTISTS' INSURANCE PROGRAM

STATEMENT OF OPERATIONS

Years ended December 31, 1992 and 1991

	1992	1991
Insurance premiums - gross		
Basic life	\$ 4,860,773	\$ 4,140,533
Dependents' life	416,214	372,161
Accidental death and dismemberment	374,000	365,957
Dependents' accidental death and dismemberment	23,241	22,635
Long term disability	11,516,942	7,953,080
Office overhead	3,016,764	2,604,704
Office contents	2,208,750	2,103,686
Practice interruption	726,852	708,532
General liability	753,659	697,642
Malpractice	3,510,416	3,353,307
Dentists' staff plan	198,913	179,252
Personal umbrella liability plan	79,564	70,107
	<u>27,686,088</u>	<u>22,571,596</u>
Insurance premiums to insurers	24,074,859	19,627,474
Balance, representing collection and administration fee to Canadian Dental Service Plans Inc.	<u>\$ 3,611,229</u>	<u>\$ 2,944,122</u>

CANADIAN DENTISTS' INSURANCE PROGRAM
STATEMENT OF CHANGES IN FINANCIAL POSITION
Years ended December 31, 1992 and 1991

	1992	1991
Cash provided by (used for)		
Operating activities		
Insurance premiums received, net of refunds and provincial taxes	\$32,960,280	\$18,601,411
Net premiums paid to insurers	(23,731,634)	(19,614,504)
Payments to Canadian Dental Service Plans Inc. on account of collection and administration fee	<u>(3,611,229)</u>	<u>(2,944,122)</u>
	5,617,417	(3,957,215)
Change in non-cash working capital balances		
Accounts payable	138,694	9,915
Change in cash and short term investment during the year	<u>5,756,111</u>	<u>(3,947,300)</u>
Cash and short term investment - at beginning of year	1,096,874	5,044,174
- at end of year	<u>\$ 6,852,985</u>	<u>\$ 1,096,874</u>

CANADIAN DENTISTS' INSURANCE PROGRAM
NOTES TO FINANCIAL STATEMENTS
Years ended December 31, 1992 and 1991

1. General

Canadian Dentists' Insurance Program offers group life, disability and other insurance to members of the Canadian dental profession, their families and employees. The program is unincorporated and operates under the authority of a participation agreement between Canadian Dental Association and the dental associations of the individual Canadian provinces.

Canadian Dental Association has entered into an agreement with Canadian Dental Services Plans Inc. whereby the latter provides collection and administration services to Canadian Dentists' Insurance Program for a fee which is calculated as 15% of the premiums paid to insurers under the program.

These financial statements present the financial position and results of operations of Canadian Dentists' Insurance Program. They do not include any assets, liabilities, income or expense of Canadian Dental Association, Canadian Dental Service Plans Inc. or any provincial dental association.

2. Comparative figures

Certain figures of the prior year have been reclassified to conform with the presentation adopted in the current year.

**CANADIAN FUND FOR DENTAL EDUCATION
AND
CANADIAN DENTAL FOUNDATION**

PROPOSAL FOR MERGING OF CHARITABLE ENTITIES WITHIN CDA

The Management Committee of the Canadian Dental Association expressed its desire to maximize the potential of its existing charities and trusts by administering these as a single entity. The CDA believes that integrating CDA's fund-raising efforts would accomplish more than is possible through separate organizations and administrative entities. This would involve the Canadian Fund for Dental Education (CFDE), the Canadian Dental Foundation (CDF), composed of the Library Trust Fund and the Gollop Bequest; the Canadian Dental Research Foundation (CDRF), and the Grieve Memorial Lectureship Trust.

A single administration would be charged with fund-raising and disbursement of monies. Its objective would be to stimulate the flow of funds from previously untapped sources in support of dentistry and oral health. The sources of funding are the profession, the business community, foundations and academia.

Under a single integrated administration and management, the unique objectives of the CFDE, the CDF and the other mentioned charities and trusts will be retained.

HISTORIES OF CURRENT ENTITIES INVOLVED IN PROPOSED MERGER

Canadian Dental Foundation (CDF)

Established in October, 1988, under the Canada Corporations Act, the objectives of the Canadian Dental Foundation are to create and operate a fund to encourage good dental health in Canada including the promotion of high levels of technical competence among dentists.

The CDF consists of the Library Trust Fund and the Gollop Bequest.

Dr. Sydney Wood Bradley Memorial Library Trust Fund

In 1950, the Library Deed of Trust received legal and governmental approval, thus establishing the CDA Library and Library Trust Fund. The purpose of the Fund is to support the costs of purchasing books, journals and other collection materials, while related administrative expenses have been paid by CDA generally.

**CANADIAN FUND FOR DENTAL EDUCATION
AND
CANADIAN DENTAL FOUNDATION**

- 2 -

Dr. Sydney Wood Bradley of Ottawa, a long time supporter of the CDA Library, made provisions in his will to ensure that the Library continues its mandate to provide information to Canadian dentists. The Library received \$50,000 from the estate of Dr. Bradley in 1967, and was consequently named the Sydney Wood Bradley Memorial Library in honour of his support and contribution.

Dr. Bradley's daughter, Mrs. Helen Langstaff, continued in her father's tradition and bequeathed \$1.6 million to the Library in 1986. The Canadian Dental Foundation currently manages the Langstaff bequest on behalf of the CDA Library.

Dr. Frederic Gollop Bequest

In 1985, Dr. Frederic Gollop, a graduate of the University of Toronto and a practicing Ottawa dentist of 50 years, bequeathed funds to the CDA toward the "well-being of the profession".

In 1990, the CDA transferred the funds from the Gollop estate to the Canadian Dental Foundation to be used to carry out the last wishes of Dr. Gollop.

The Canadian Fund for Dental Education (CFDE)

The CFDE is a registered charitable organization which was organized by forward-thinking representatives of dental industry and the Canadian Dental Association under a Deed of Trust dated October 1962.

The CFDE's sole objective is the improvement of oral health through the raising and allocating of funds for the support of programs in dental education, research and service.

The Fund is directed by an eleven-member Board of Trustees, comprised of eight dentists and three corporation executives.

The Fund's programs are made possible by voluntary contributions from business and industry, foundations, dental and allied dental health professionals and organizations, dental students and the general public. In the past 30 years, the CFDE has provided more than \$3,800,000 to programs for the advancement of dentistry.

**CANADIAN FUND FOR DENTAL EDUCATION
AND
CANADIAN DENTAL FOUNDATION**

- 3 -

Canadian Dental Research Foundation Trust (CDRF)

The administration of this trust was acquired by the CDA in March 1979. The trust offers a biennial research award whose purpose is to encourage research related to dentistry conducted by graduate or post-graduate students in Canada.

A prize of \$2,000 and a plaque are presented to the student who submits the best report on a research project. The CDRF trophy is also presented to the dental school in which the research was conducted. Entries are currently judged by a group of three qualified referees appointed by the Committee on Dental Materials and Devices. The final decision is made by the CDA Board of Governors.

Entries are limited to graduate or post-graduate students who have conducted their work in association with the dental faculty of a Canadian university.

Grieve Memorial Lectureship Trust

Established in July 1950, this trust originated from the recommendation of the Orthodontic section of the CDA that a lectureship in orthodontics be established as a memorial to the late Dr. George Wellington Grieve.

The annual income for the Trust fund is used by the CDA to defray the travelling expenses of the person selected and invited to deliver the Grieve Memorial Lectureship usually held during the CDA annual dental meeting. The speaker is selected by a committee composed of the Secretary of the Association and the Chairman and Secretary of the Orthodontic section.

ORGANIZATION

The affected funds, CDF, CFDE, CDRF, the Sydney Wood Bradley Memorial Trust Fund and the Grieve Memorial Lectureship Trust were created by resolutions of the Board of Governors. Their amalgamation under a single fund-raising source should also be by resolution of the Board of Governors of the CDA. Also, at an appropriate time, the new organization must have its by-laws and board membership formally approved by CDA Governors.

The name for the new organization should reflect in very simple terms the purpose of the organization. It is recommended that the following name be utilized for the new entity. *(The following illustration is to describe the merger process and is **not** an official logo.)*

**CANADIAN FUND FOR DENTAL EDUCATION
AND
CANADIAN DENTAL FOUNDATION**

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**Dentistry
Canada Fund**

A partnership of:
Canadian Fund for Dental Education • Canadian Dental Foundation
Library Trust Fund • Canadian Dental Research Foundation • Grieve Memorial Lectureship Trust

Promoting improvements in oral health for Canadians

- This name respects the previous entities, provides a succinct, easily understood name for new supporters, shows the historical connections for previous donors, and provides an easily understood name for potential new supporters.
- For the initial Board, CDA would appoint four members from each existing board of CFDE and CDF including two representatives from dental industry, in consultation with the chairs. Term of office would be three years (once renewable), and staggered to provide for continuity.
- The new board will respect and assume responsibility for current and ongoing programs previously committed to.
- Funds received by the new organization through a menu of choices will be distributed by the new Board according to the broader mandate.
- The Board will attempt to have appropriate geographic representation wherever possible, however this should be policy not a by-law.
- Once the *Dentistry Canada Fund* is in place, the program needs of that structure will be addressed, ie. a volunteer base; planned giving; wills and estates, etc. The services of a fund-raising consultant will be sought to assist in laying out a plan and to help administer the requirements of the new organization.
- One of the goals of the new organization is to widen the donor base and to give donors more options for their donations. The new organization will be better positioned to initiate a planned giving program and foundation approaches.

**CANADIAN FUND FOR DENTAL EDUCATION
AND
CANADIAN DENTAL FOUNDATION**

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- The new constitution would be an amalgamation of the constitutions of the CFDE and CDF, to fully incorporate the functions and mandates of all concerned entities in terms of administration, fund-raising and distribution of funds.

TIMELINES

- CDA Management Committee has stated that it supports the CDF/CFDE joint proposal in principle, and has directed that the legal proceedings leading to integration proceed.
- It is recommended that the launch date for the first fund-raising campaign under the name "Dentistry Canada Fund" be January, 1994.
- Consequently, it is proposed that current campaigns continue for the balance of 1993. The CFDE will proceed with its "October - CFDE Month" campaign, and include an announcement informing the profession and dental industry of the new organization in the solicitation mailing and all dental publications in the Fall.

September 10-11, 1993 Consideration for approval of the CDF/CFDE joint proposal by the CDA Board of Governors.

September 11 -
December 31, 1993 The existing charities would continue to operate as separate entities -- the CDF and CFDE under one administration. The CFDE October solicitation would be conducted unchanged. However, the formation of the new *Dentistry Canada Fund* would be introduced to the profession in the fund-raising literature and in news releases and articles appearing in dental publications in the Fall. This would allow sufficient time for donors to become familiar with the organization and lay the ground-work for next year's solicitation under the new name.

January 1994 Launch of *Dentistry Canada Fund* advertising and solicitation campaign to the profession, provincial organizations, dental societies and industry. Implementation of planned giving program and foundation approaches.

**CANADIAN FUND FOR DENTAL EDUCATION
AND
CANADIAN DENTAL FOUNDATION**

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FINANCIAL SUPPORT

- The CDA/CFDE administrative affairs lawyer has indicated a legal fee of approximately \$5,000 which will include the cost of the merger and the new name.
- It is recommended that the legal costs for the amalgamation and new name be shared equally by the CFDE and the CDF up to \$10,000. SciCan has generously offered to fund any additional legal amalgamation costs if required.

RECOMMENDATIONS

It is recommended:

THAT the proposed merger of the existing Canadian Dental Foundation (CDF), the Canadian Fund for Dental Education (CFDE), the Canadian Dental Research Foundation (CDRF), the Sydney Wood Bradley Memorial Library Trust Fund, and the Grieve Memorial Lectureship Trust, under the suggested name "Dentistry Canada Fund" be approved; and,

THAT any by-law implications involved in such a merger be identified, and by-laws for the new fund-raising entity (DCF) be developed and brought before the Board of Governors for approval.

Respectfully submitted,

Dr. Gordon W. Thompson
Chairman,
Canadian Fund for Dental Education

Dr. Bradley W. Holmes
Chairman,
Canadian Dental Foundation

COMMITTEE ON COMMUNITY AND INSTITUTIONAL DENTISTRY

MEMBERSHIP

The Committee on Community and Institutional Dentistry shall reflect in its composition, representation of the major geographic regions of Canada and shall consist of 9 members plus Executive Liaison, as follows:

- . 2 general dental practitioners
- . 1 oral and maxillofacial surgeon
- . 1 oral pathologist/biologist
- . 1 representative of public health dentistry
- . 1 representative of pediatric dentistry
- . 1 representative of dental auxiliaries
- . 1 representative of the Canadian Hospital Association
- . 1 representative of the Canadian Forces Dental Services
- . Executive Liaison

DUTIES

1. To foster and encourage by appropriate means all methods of reducing and preventing oral disease.
2. To monitor and review developments in dental practice within institutions as well as the wider community.
3. **To monitor and review developments with respect to professional resource utilization.**
4. To develop guidelines and resources to assist practitioners in both settings to respond to new developments and to practice safely, efficiently and professionally.
5. To work in cooperation with other CDA Committees, dental practitioners, the dental specialties, hospital administration and the medical profession as required to monitor developments and produce guidelines and resources.
6. To advise the CDA Board of Governors on issues related to the practice of dentistry within institutions as well as the wider community.
7. To act upon any related matters that may from time to time be assigned by the Executive Council.

Approved by the CDA Board of Governors
September, 1993



SCHEDULE A

March 9, 1993

Mr. Bernard Dorval
President and Chief Executive Officer
The Laurentian/Imperial Company
1100 Boul. Renée Levesque Ouest
Montreal, Quebec
H3B 4N4

CANADIAN
DENTAL
ASSOCIATION
L'ASSOCIATION
DENTAIRE
CANADIENNE

Dear Mr. Dorval:

Re: Canadian Dentists' Insurance Program

This letter confirms the agreement of The Imperial Life Assurance Company of Canada ("Imperial"), the Canadian Dental Association ("CDA") and Canadian Dental Service Plans Inc. ("CDSPI") to settle, on the terms and conditions set out below, the issues outstanding between them relating to the life and disability insurance plans underwritten by Imperial through the Canadian Dentists' Insurance Program ("CDIP"). Agreement to the arrangements set out in this letter does not constitute an admission of liability or concession on the part of Imperial, CDA or CDSPI.

In consideration of the covenants, agreements and mutual releases set out in or to be executed and delivered in accordance with the terms of this letter agreement, Imperial and each of CDA and CDSPI covenant and agree with each other as follows:

1. Imperial will pay to the CDA on behalf of CDIP the sum of \$650,000 and will cause its solicitors to execute and deliver to CDA's solicitors consents, in the forms attached to this letter as Schedule A, to the dismissal, without costs, of the counterclaim against CDA relating to the termination of Master Agreement Number 2596 and the actions brought by CDA against Imperial which are described in paragraph 2 of this letter. In addition, Imperial and The Laurentian/Imperial Company will execute and deliver to CDA and CDSPI a release in the form attached to this letter as Schedule B.

Mr. Bernard Dorval
President and Chief Executive Officer
The Laurentian/Imperial Company

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March 9, 1993

2. CDA will cause its solicitors to execute and file in the Ontario Court (General Division), consents, in the forms attached to this letter as Schedule A, to the dismissal, without costs, of the actions brought by it against Imperial on behalf of Dr. Groot, Dr. Hogan, Dr. MacKay and Dr. Rasul and the action brought by it concerning the death benefit paid by Imperial to the estate of Dr. Cooper. In addition, CDA and CDSPI will execute and deliver to Imperial a release in the form attached to this letter as Schedule C. For greater certainty, CDA and CDSPI confirm to Imperial that the CDIP life and disability insurance coverages held by Dr. Groot, Dr. Hogan, Dr. MacKay, Dr. Rasul and Dr. Oliver as of December 31, 1988 have been assumed by Metropolitan Life Insurance Company and/or The Prudential Group Assurance Company of England (Canada) and that any claims asserted by such individuals under CDIP policies issued by Imperial will be paid through CDIP, with no claim being made against Imperial by CDA or CDSPI for any such payment, CDA and CDSPI waiving any claim they might have or purport to have against Imperial or The Laurentian/Imperial Company with respect to those individuals.
3. Imperial will continue paying disability benefit payments and death claims in accordance with the terms of the applicable CDIP insurance contracts to the plan participants who are currently receiving benefits under Group Policy Number 51947 or who are acknowledged to have their premiums waived under the CDIP basic life and/or dependents' life plans and will make future payments in accordance with the terms of the applicable contracts if Imperial's liability is established in respect of claims disputed by disabled plan participants.
4. The CDIP life plan experience will be calculated by Imperial to December 31, 1992 on a consistent basis with calculations made annually for prior periods, subject to two adjustments. First, an amount of \$335,000 will be credited to the 1992 experience in recognition of the agreement reached on Dr. Cooper's case. Second, a charge of \$781,000 will be made against the 1992 experience in recognition of Imperial accepting responsibility for the waiver of premium claimants described in paragraph 5. The format for the calculation shall be as set out in Schedule D to this letter agreement.

Mr. Bernard Dorval
President and Chief Executive Officer
The Laurentian/Imperial Company

Page 3

March 9, 1993

Details of Imperial's recalculation of the life plan experience will be provided to CDSPI by Imperial for review and verification by Towers Perrin. Imperial will pay to the CDA, for the account of CDIP, the amount of the recalculated surplus as at December 31, 1992 concurrently with its delivery to CDA of this letter agreement.

Following receipt of this payment CDA will have no further right to recover surplus under the underwriting agreements of Master Agreement Number 2596 and Group Policy Numbers 51946 and 51947 and Imperial will have no further obligation to provide financial statements relating to the CDIP plans underwritten by Imperial or to permit audits of the financial experience of such plans by CDSPI's consultants.

5. Imperial will assume liability, effective as of January 1, 1992, for the waiver of premium status and potential death claims for the plan participants listed in the list attached as Schedule E to this letter (the "Waiver Claimants").

Life insurance coverage for the Waiver Claimants and their dependents in the amounts described in Schedule E will continue to be provided under the CDIP life insurance policies issued to them in 1992 by The Prudential Assurance Company Limited ("Prudential") and CDIP group dependents' life policy number ZD95009. Such coverage will continue on a waiver of premium basis until the Waiver Claimant dies or ceases to be totally disabled. For this purpose a Waiver Claimant will be considered to be "totally disabled" if, as a result of sickness or injury, he is prevented from performing the whole of the duties of the practice of dentistry. A Waiver Claimant who ceases to be totally disabled and is therefore no longer eligible for waiver of premium status will be permitted to continue his basic life insurance coverage and/or dependents' life insurance coverage through CDIP on a premium-paying basis. Imperial will have no liability for the coverage of a Waiver Claimant who has ceased to be totally disabled and whose coverage is being provided through CDIP on a premium-paying basis.

Mr. Bernard Dorval
President and Chief Executive Officer
The Laurentian/Imperial Company

Page 4

March 9, 1993

The health status of the Waiver Claimants will be adjudicated on an ongoing basis by Prudential. As soon as practicable after the date of this letter and prior to the filing in court of the consents attached to this letter as Schedule A, Imperial will enter into a reinsurance agreement with Prudential providing for the prompt payment by Imperial of all death claims payable in respect of the Waiver Claimants upon receipt of proof of death and confirming that Prudential will adjudicate the health status of the Waiver Claimants on an ongoing basis, in a reasonable manner, consistent with normal industry practices and standards, as applicable to the definition of "totally disabled" set out above. This agreement will confirm the arrangements for Imperial to review all information relative to the ongoing assessment of these waiver claims on the understanding that Imperial may not ask Prudential to re-adjudicate any of these waiver claims prior to July 1, 1994. The agreement will further provide that after July 1, 1994 Prudential will work with Imperial to arrive at a mutual agreement concerning continuation of the waiver or premiums status. It will also provide that Prudential will promptly advise Imperial and CDSPI of any death claim made on behalf of a Waiver Claimant or of a Waiver Claimant ceasing to be totally disabled.

6. Imperial will endeavour to provide to CDSPI, on an ongoing basis, all available details of any audits of CDIP participants or review procedures for claims of CDIP participants which continue to be the responsibility of Imperial and will work with CDSPI to put into place a mutually satisfactory mechanism for the exchange of information to assist CDSPI in dealing with complaints relating to such claims.
7. The releases attached as Schedules B and C to this letter shall be executed and delivered and the payment to be made by Imperial in accordance with paragraph 1 shall be made concurrently with the execution and delivery of this letter agreement. Imperial shall deliver to CDA two copies of each of the consents attached to this letter as Schedule A which have been executed by its solicitors concurrently with its delivery to CDA of its executed copy of this letter agreement. CDA shall, within five business days after the later of (i) its receipt of such consents and (ii) its receipt of confirmation that the reinsurance

Mr. Bernard Dorval
President and Chief Executive Officer
The Laurentian/Imperial Company

Page 5

March 9, 1993

agreement described in paragraph 5 has been signed by Imperial and Prudential, cause them to be signed by its solicitors and filed in the Ontario Court (General Division) and shall instruct its solicitors to provide to Imperial's solicitors copies of the orders dismissing the actions immediately following the issuance of such orders.

8. As soon as practicable following the issuance of the orders described in paragraph 7 and the receipt by CDA of the payment described in paragraph 4, Imperial shall issue and CDA shall accept an amendment to Group Variable Annuity Contract GA 8643 for the CDA RSP providing that the terms of the current contract are to continue in effect until December 31, 1996.
9. Each of Imperial, CDA and CDSPI shall at all times after the execution of this letter agreement do or cause to be done all such things and execute and deliver such further documents as may be reasonably required in order to give effect to the provisions of this agreement.
10. This agreement shall be governed by and construed in accordance with the laws of the Province of Ontario and the federal laws of Canada applicable therein.
11. This agreement shall enure to the benefit of and be binding on the successors and assigns of each of the parties, including without limitation any person to whom the rights of a party may be subrogated.

Attached are two copies of Schedule C, signed by CDA and CDSPI. These releases are being delivered in escrow pending your acceptance of the agreement as set out in this letter. Also attached are execution copies of the consents attached to this letter as Schedule A. Please have signed and return to us the attached duplicate copies of this letter, two copies of Schedule B and the executed consents, accompanied by Imperial's cheques

Mr. Bernard Dorval
President and Chief Executive Officer
The Laurentian/Imperial Company

Page 6

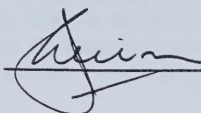
March 9, 1993

in the amount of \$650,000 and in the amount of the recalculated life plan surplus, no later than March 20, 1993 to confirm Imperial's agreement to the foregoing.

Sincerely,

Canadian Dental Association

by:



Agreement and acceptance of the foregoing is confirmed.

Canadian Dental Service Plans Inc.

by:



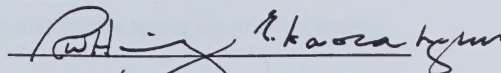
Date:

MARCH 16, 1993

Agreement and acceptance of the foregoing is confirmed.

The Imperial Life Assurance Company of
Canada

by:



Date:

March 19, 1993

SCHEDULE A

The following Consents to dismissal without costs are included in Schedule A:

<u>Action No.</u>	<u>Parties</u>	<u>Claim</u>
58594/90Q	CDA vs Imperial Imperial vs CDA	Dr. Cooper death claim Termination of Master Agreement
356327/89U	CDA vs Imperial	Dr. MacKay disability claim
358663/89U	CDA vs Imperial	Dr. Groot disability claim
359947/89U	CDA vs Imperial	Dr. Hogan disability claim
366175/89U	CDA vs Imperial	Dr. Rasul disability claim

SCHEDULE B

RELEASE

In consideration of the sum of one dollar (\$1.00) of lawful money of Canada now paid by each of Canadian Dental Association ("CDA") and Canadian Dental Service Plans Inc. ("CDSPI") to the undersigned (the receipt of which is hereby acknowledged) and for other good and valuable consideration, each of the undersigned hereby releases and forever discharges CDA and CDSPI and their respective employees, agents and other representatives, (collectively referred to as the "Released Parties"), from all actions, debts, claims and demands whatsoever which either or both of the undersigned now has or may have hereafter for or by reason of or arising out of the underwriting by The Imperial Life Assurance Company of Canada ("Imperial") of the life and disability insurance plans offered by CDA through the Canadian Dentists' Insurance Program and/or the termination of Imperial as the carrier of such plans, including, without limitation, any action, debt, claim or demand arising out of the subject matter of a counterclaim commenced against CDA by Imperial in Action No. 58594/90Q, provided however that this Release does not release or discharge any action, debt, claim or demand arising out of failure by CDA or CDSPI to carry out or perform the terms of the letter agreement between CDA, CDSPI and Imperial dated March 9, 1993 to which this Release is attached as Schedule B.

The provisions of this Release shall enure to the benefit of the successors and assigns of the Released Parties and shall be binding upon the affiliates, successors and assigns of the undersigned.

IN WITNESS WHEREOF each of the undersigned has duly executed this Release, this
day of _____, 1993.

THE IMPERIAL LIFE ASSURANCE COMPANY OF CANADA

by: _____ c/s

THE LAURENTIAN/IMPERIAL COMPANY

by: _____ c/s

SCHEDULE C

RELEASE

In consideration of the sum of one dollar (\$1.00) of lawful money of Canada now paid by Imperial to each of the undersigned (the receipt of which is hereby acknowledged) and for other good and valuable consideration, each of the undersigned hereby releases and forever discharges The Laurentian/Imperial Company, The Imperial Life Assurance Company of Canada ("Imperial") and their respective employees, agents and other representatives (collectively referred to as the "Released Parties"), from all actions, debts, claims and demands whatsoever which either or both of the undersigned now has or may have hereafter for or by reason of or arising out of the underwriting by Imperial of the life and disability insurance plans offered by CDA through the Canadian Dentists' Insurance Program and/or the termination of Imperial as the carrier of such plans, including without limitation, any action, debt, claim or demand arising out of the subject matter of the legal proceedings commenced against Imperial by CDA in the following actions: 356327/89, 359947/89, 366175/89, 358663/89 and 58594/90Q; provided however that this Release does not release or discharge any action, debt, claim or demand:

- a) arising out of any failure by Imperial to carry out or perform the terms of the letter agreement between Imperial and the undersigned dated March 9, 1993 to which this Release is attached as Schedule C, (the "Letter Agreement"); or
- b) involving a claim for disability or life insurance benefits by a plan participant described in paragraph 3 of the Letter Agreement or his or her personal representative in respect of disability benefits or a death claim alleged to be payable by Imperial.

The provisions of this Release shall enure to the benefit of the successors and assigns of the Released Parties and shall be binding upon the successors and assigns of each of the undersigned.

IN WITNESS WHEREOF each of the undersigned has duly executed this Release this day of , 1993.

CANADIAN DENTAL ASSOCIATION

by: _____

CANADIAN DENTAL SERVICE PLANS INC.

by: _____

SCHEDULE D

PRO-FORMA
RECALCULATION OF CDIP LIFE
PLAN SURPLUS TO DECEMBER 31, 1992

Surplus as of December 31, 199 ¹ ₂	\$201,950.
Credit to Life Surplus re: 1992 Experience per Imperial pro-forma calculation (est.)	<u>350,000.*</u>
Estimated pro-forma Life Surplus as of December 31st, 1992	551,950.*
Reversal of Dr. Cooper's death claim	335,000.
Charge to Life Surplus for Schedule E Waiver of Premium claims to be covered by Imperial	<u>(781,000.)</u>
Pro-forma Life Surplus as of December 31st, 1992 to be paid in full to CDIP	105,950. *

* To be re-calculated and paid based on final 1992 figures.

SCHEDULE E

Waiver of Premium Claimants

(Amounts of Coverage and Reserves shown

are as of January 1, 1992)

CDIP #	NAME	D.O.B.	D.O.D.	BASIC LIFE	DEPTS' LIFE	RESERVES
15913	Drew-Brook	05/29	11/88	\$ 31,000	\$ 10,000	\$ 16,211
15897	Fuzy	05/33	12/88	\$ 31,000	\$ 10,000	\$ 16,064
1803	Labrie	05/25	12/88	\$ 15,500		\$ 4,996
7588	Sawa	02/34	09/88	\$283,000	\$ 10,000	\$154,387
7432	Freidin	01/42	08/88	\$509,000	\$ 90,000	\$265,740
8208 & 10212	Odland	04/39	11/88	\$344,000	\$ 20,000	\$183,370
298	Hoffmann	10/27	07/88	\$256,000		\$118,088
9316	McCann	04/31	12/88	<u>\$ 43,000</u>		<u>\$ 22,685</u>
				\$1,512,500	\$140,000	\$781,541

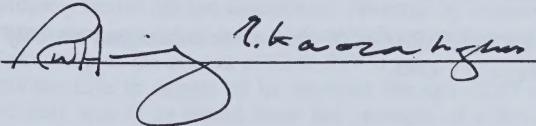
RELEASE

In consideration of the sum of one dollar (\$1.00) of lawful money of Canada now paid by each of Canadian Dental Association ("CDA") and Canadian Dental Service Plans Inc. ("CDSPI") to the undersigned (the receipt of which is hereby acknowledged) and for other good and valuable consideration, each of the undersigned hereby releases and forever discharges CDA and CDSPI and their respective employees, agents and other representatives, (collectively referred to as the "Released Parties"), from all actions, debts, claims and demands whatsoever which either or both of the undersigned now has or may have hereafter for or by reason of or arising out of the underwriting by The Imperial Life Assurance Company of Canada ("Imperial") of the life and disability insurance plans offered by CDA through the Canadian Dentists' Insurance Program and/or the termination of Imperial as the carrier of such plans, including, without limitation, any action, debt, claim or demand arising out of the subject matter of a counterclaim commenced against CDA by Imperial in Action No. 58594/90Q, provided however that this Release does not release or discharge any action, debt, claim or demand arising out of failure by CDA or CDSPI to carry out or perform the terms of the letter agreement between CDA, CDSPI and Imperial dated March 9, 1993 to which this Release is attached as Schedule B.

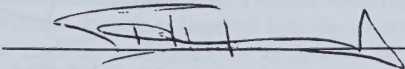
The provisions of this Release shall enure to the benefit of the successors and assigns of the Released Parties and shall be binding upon the affiliates, successors and assigns of the undersigned.

IN WITNESS WHEREOF each of the undersigned has duly executed this Release, this 19 day of March, 1993.

THE IMPERIAL LIFE ASSURANCE COMPANY OF CANADA

by:  c/s

THE LAURENTIAN/IMPERIAL COMPANY

by:  c/s

RELEASE

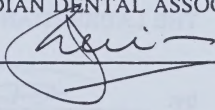
In consideration of the sum of one dollar (\$1.00) of lawful money of Canada now paid by Imperial to each of the undersigned (the receipt of which is hereby acknowledged) and for other good and valuable consideration, each of the undersigned hereby releases and forever discharges The Laurentian/Imperial Company, The Imperial Life Assurance Company of Canada ("Imperial") and their respective employees, agents and other representatives (collectively referred to as the "Released Parties"), from all actions, debts, claims and demands whatsoever which either or both of the undersigned now has or may have hereafter for or by reason of or arising out of the underwriting by Imperial of the life and disability insurance plans offered by CDA through the Canadian Dentists' Insurance Program and/or the termination of Imperial as the carrier of such plans, including without limitation, any action, debt, claim or demand arising out of the subject matter of the legal proceedings commenced against Imperial by CDA in the following actions: 356327/89, 359947/89, 366175/89, 358663/89 and 58594/90Q; provided however that this Release does not release or discharge any action, debt, claim or demand:

- a) arising out of any failure by Imperial to carry out or perform the terms of the letter agreement between Imperial and the undersigned dated March 9, 1993 to which this Release is attached as Schedule C, (the "Letter Agreement"); or
- b) involving a claim for disability or life insurance benefits by a plan participant described in paragraph 3 of the Letter Agreement or his or her personal representative in respect of disability benefits or a death claim alleged to be payable by Imperial.

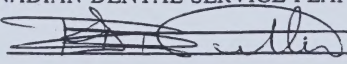
The provisions of this Release shall enure to the benefit of the successors and assigns of the Released Parties and shall be binding upon the successors and assigns of each of the undersigned.

IN WITNESS WHEREOF each of the undersigned has duly executed this Release this 16th day of MARCH, 1993.

CANADIAN DENTAL ASSOCIATION

by: 

CANADIAN DENTAL SERVICE PLANS INC.

by: 

TO: Kingsley Butler

FROM: Beth Moore

DATE: April 15, 1993

RE: Application of Imperial Life Settlement Proceeds

The proposal for the application of the Imperial Life settlement proceeds has been reviewed with Jeff Leon of Fasken Campbell Godfrey. He feels that what is proposed is acceptable in relation to the judgment of Mr. Justice McKeown.

The proposal deals with the three financial components of the Imperial Life settlement. These components are as follows:

1. Settlement of Waiver of Premium Claims and Dr. Cooper Action

In settlement of the CDA claims against Imperial Life relating to the life insurance plan, Imperial Life agreed to assume liability for the life insurance claims of eight life plan participants and their dependents with waiver of premium status, reverse the charge against life plan experience for the death claim paid by Imperial Life to the estate of Dr. Cooper in February, 1989 and recalculate life plan surplus to December 31, 1992 after accounting for these adjustments.

When Prudential became the CDIP carrier on January 1, 1992, special arrangements were made between it and the CDA for it (i) to assume liability for the waiver of premium claimants who had been improperly denied life and dependents' coverage by Imperial Life and for whom special coverage arrangements had been made with Metropolitan Life, and (ii) to loan to the CDIP life plan surplus the amount of \$243,757 to restore to surplus the amount retained by Metropolitan Life in respect of its payment through CDIP of Dr. Cooper's death claim. This loan was to be repaid from the proceeds of a favourable settlement of the CDA's claims against Imperial Life or, if a favourable settlement was not obtained, it was to be repaid from new surplus or, in any event, on contract termination. The settlement with Imperial Life enables the CDA to relieve Prudential of liability for the eight waiver of premium claimants for whom Imperial Life has assumed liability, thereby permitting the \$781,541 in reserves established by Prudential for these claims to be released as proceeds of the settlement.

The financial implications of this aspect of the settlement are that the Prudential loan to the life plan surplus fund in the amount of \$243,757 can be repaid from the proceeds of the settlement (the \$781,541 in reserves which Prudential can now release). The CDA can then direct Prudential to release the balance of the \$781,541 (\$537,243) to life surplus. This aspect of the settlement also relieves the CDIP life plan of potential death claims totalling \$1,652,000 as of January 1, 1992 and reverses the effect on CDIP life plan surplus of Imperial Life's charge to the plan of the death claim in the amount of \$335,000

made on the life policies converted by Dr. Cooper as of January 1, 1989 to non-CDIP Imperial Life policies. The reversal of the Cooper claim and the establishment by Imperial Life of reserves for the waiver of premium claimants are to be taken into account in Imperial Life's financial accounting for the CDIP plans.

2. Release of Life Plan Surplus

It was also agreed as part of the settlement that financial accounting for the CDIP plans by Imperial Life would end as of December 31, 1992 and that the full amount of life surplus held by Imperial Life on that date would be released by Imperial Life. (Under the underwriting provisions of the Imperial Life Master Agreement and Group Policies financial accounting was to continue to December 31, 1993, with one half of the surplus at December 31, 1992 being released as of that date and the balance being released upon finalization of the 1993 financial statements.) The surplus held by Imperial Life as of December 31, 1992 has been determined to be \$210,155. Should it become necessary to make a surplus redistribution as provided in the judgement of Mr. Justice McKeown this amount would be considered to be surplus generated from premiums paid prior to 1989 since no new premium money was paid to Imperial Life after 1988. Arguably it forms part of the pre-1986 surplus since no new experience surplus was generated between 1986 and 1988. The CDA should therefore be able to apply these funds to the payment of its obligations under the judgement should the appeal be unsuccessful.

3. Settlement of Disability Claims

The final component of the settlement was the payment by Imperial Life of \$650,000 to settle the outstanding litigation between Imperial Life and the CDA. This litigation included claims by the CDA against Imperial Life in respect of four LTD claims denied by Imperial Life for late submission of proof of claim and paid through CDIP under special arrangements financed by a loan from the life plan surplus funds to the LTD plan and the action brought by the CDA against Imperial Life to reverse the charge against life plan experience of the Cooper claim. Since the CDA's Cooper claim was fully resolved by Imperial Life's reversal from life plan experience of this death claim charge (as discussed under #1 above) the \$650,000 represents proceeds of settlement of the four actions brought in respect of the LTD claims and should be used by the LTD plan to repay the loan made to it from life plan surplus to finance the special arrangements.

ABM/pam

kingmemo.15/abmdisk

Jack H. Harris, D.D.S.
President
211 East Chicago Avenue
Chicago, Illinois 60611-2678
(312) 440-2871
Fax (312) 440-7488

May 14, 1993

Dr. Ernesto Acuña E.
Asociacion Dental Mexicana, A.C.
Ezequiel Montes No. 92
Col Tabacalera 06030
México D.F.
México

Dear Ernesto:

The management committees of the Canadian and American Dental Associations met recently in Ottawa. The North American Free Trade Agreement (NAFTA) was one of the items on the agenda for general discussion, and with specific reference to the presentation made by the Asociacion Dental Mexicana during the Chicago Mid-winter meeting.

You will recall, Ernesto, that we all agreed at that meeting to:

- 1) Discuss the feasibility of proceeding with your proposal with our respective management committees and
- 2) Write to each other with regard to future direction by March 30, 1993.

Since we had the opportunity in Ottawa to discuss the issues, and come to an agreement on the approach to be taken, we felt that a joint letter to you would be appropriate. Of basic concern was the expending of valuable resources, financial and human, during a period of intense expenditure reduction, on issues which have the potential to drain the treasury without at least a reasonable chance of success.

In response to the expanded proposal contained in your letter dated March 23, 1993, we would propose the following alternative plan of action.

- I. The creation of an advisory committee, for a two year period of time, with membership appointed by each association. The advisory committee would meet twice each year, in conjunction with the annual sessions or other major meetings that would allow a meeting in the early part of the year and a second meeting in the latter part of the year. By holding the meetings of the advisory committee during a scheduled dental meeting the costs to the three associations could be minimized. After the

first two years, the functioning of the advisory committee should be evaluated, leading to a decision about the continued commitment of resources.

The primary focus of these meetings would be dental education and accreditation. The American Dental Association would be represented by the assistant executive director of the Division of Education and the chairman of the American Dental Association Commission on Dental Accreditation. The Canadian professional interests would be represented by the Commission on Dental Accreditation for Canada and the president of the Canadian Dental Association. The first meeting of the advisory committee is suggested to be in conjunction with the Annual Session of the American Dental Association to be held in San Francisco on November 6-9, 1993, and the second meeting in conjunction with the interim annual meeting of the Canadian Dental Association to be held in Ottawa, on April 9-11, 1994.

To the extent that the development of this advisory committee and this relationship is helpful in influencing your government, the associations are pleased to be a part of this project. Because of the licensure system described below, it is unclear that the U.S. and Canadian governments will be influenced by the joint arrangement.

- II. The initiation of interaction related to accreditation of dental education programs. The Canadian and American Dental Associations will enter into a project with the Asociacion Dental Mexicana intended to lead to a homogeneous dental education system in México in accordance with North American standards. To achieve this end, the following steps are proposed:
- a) Provision to the A.D.M. of accreditation materials and information from the Commission on Dental Accreditation of Canada and the American Dental Association Commission on Dental Accreditation that would also include information about the National Board Dental Examination written examinations and about the licensure procedures of the various states and provinces.
 - b) Attendance of observers from the A.D.M. at the meetings of the Commission on Dental Accreditation of Canada and the American Dental Association Commission on Dental Accreditation, with the goal of expanding on the understanding of these accreditation systems. However, ADM observers would not be eligible, at this time, to attend executive sessions related to accreditation decisions on US and Canadian Schools.

- c) Attendance of observers from the A.D.M. at accreditation site visits of the Commission on Dental Accreditation of Canada and the American Dental Association Commission on Dental Accreditation, with the goal of gaining an understanding of how the accreditation systems in the United States and Canada are carried out in dental school settings.
- d) Discussion of these interactions and activities at the semi-annual advisory committee meetings, including steps the A.D.M. could take to plan, develop and implement an accreditation program for Mexican dental schools.

III. Licensure: The following information is presented in order to clarify some apparent misconceptions about the licensure process in the United States and Canada.

Before a dentist can legally practice dentistry in the United States or Canada, his/her qualifications must be approved by a governmental agency, symbolized by the granting of a license to practice. The level of government that manages licensure is the state, district, dependency or province. The agency that administers licensure is typically called a board of dentistry or board of dental examiners. A license awarded by a board of dentistry permits the dentist to practice only within the boundaries of the province or state.

While licensure requirements vary from state to state, there are typically three requirements to qualify for licensure. These requirements are:

- 1) graduation from an accredited dental education program;
- 2) successful completion of written examinations that include the National Board Dental Examinations and, usually, a state written examination; and
- 3) successful completion of a clinical examination, that includes the National Dental Examining Board of Canada, one of the U.S. regional board examinations or a provincial or state clinical examination.

Dr. Acuña
Page Four
May 14, 1993

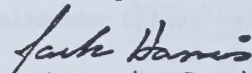
In the reciprocal agreement in force between the C.D.A. and the A.D.A., the central arrangement is the mutual acceptance of the accreditation systems of the two associations. Through this agreement, graduates of one of the countries qualify for the educational component of the licensure requirements, as though they were graduates of accredited dental schools in the licensing country. Thereby, graduates of Canadian dental schools are allowed to attempt to gain licensure through the written National Board Dental Examinations and a clinical licensure examination in any state in the United States. A similar process exists for graduates of U.S. dental schools seeking licensure in Canada.

Because the basis of the licensure systems in the United States and Canada is graduation from an accredited dental education program, the associations believe that the single most important step toward the establishment of mutual acceptance of graduates from all three countries is the establishment of equivalent accreditation systems. For this reason, the advisory committee and the education components of this relationship are of the utmost importance. Because of the need for the individual states and provinces to recognize an accreditation process, it is premature at this time to discuss licensure for all three countries.

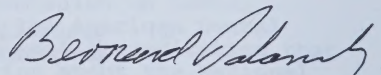
IV. Financing of this project. The finances for the development of these activities are the responsibility of each of the Associations involved.

We believe that the specific components of this plan of action can be finalized at the first meeting of the advisory committee and dates for subsequent meetings can be arranged. We look forward to hearing from you soon.

Sincerely,



Jack Harris, President
American Dental Association



Bernard Dolansky, President
Canadian Dental Association

JH:BD:nb

cc: Dr. John S. Zapp, executive director
American Dental Association

Mr. Jardine Neilson, executive director
Canadian Dental Association

SCHEDULE FOR DR. BERNARD DOLANSKY, PRESIDENT
CALENDRIER D'ACTIVITES POUR DOCTEUR BERNARD DOLANSKY, PRESIDENT

1992 - 1993

1992

August 29	Executive Council	Calgary
August 29-Sept 2	CDA Annual Convention	Calgary
August 30	Can. Society of Public Health Dentists	Calgary
September 2	University of Toronto Welcome (represented by Dr. Crawford)	Toronto
September 11	CDA/BC College Management	Vancouver
September 14	Ottawa Dental Society*	Ottawa
September 15	University of Western Ont. Welcome (represented by Dr. Crawford)	London
September 18-20	*Northern Ontario Dental Association (represented by Dr. Brookfield)	Sault Ste. Marie
September 17-20	Canadian Academy of Endodontics (represented by Dr. Diggins)	Victoria
September 21-25	FDI World Congress	Berlin
September 26	Can. Academies of Restorative Dentistry & Prosthodontics President's Dinner	Montreal
October 8	University of Montreal Welcome	Montreal
October 13	McGill University Welcome	Montreal
October 14	CDA/CDSPI Management	Toronto
October 15	All Societies Meeting*	Toronto
October 17-22	American Dental Association Convention	Orlando
October 24	Canadian Association of Dental Consultants	Kitchener
October 28, 29	Federal/Provincial Dental Health Council (represented by Dr. White)	Regina

October 29	Management Committee	Val-David
October 30-Nov 1	Executive Council Planning Session	Val-David
November 1,2	NDEB 40th Anniversary Symposium	Ottawa
November 2	NDEB Annual Meeting	Ottawa
November 5	University of Toronto Information Night	Toronto
November 20	Université Laval Welcome	Quebec
November 26	Academy of Dentistry Winter Clinic	Toronto
November 27, 28	ODA Fall Board Meeting	Toronto
December 4	Société dentaire de l'Estri	Sherbrooke
December 16	CDA/CDSPI Management Conference Call	

1993

January 11	Alpha Omega Fraternity*	Toronto
January 14	University of Toronto Seminar	Toronto
January 18	CDHA Management	Ottawa
January 21	Halton-Peel Dental Society*	Brampton
January 27	CDSPI Management	Ottawa
February 2	North Bay Dental Society*	North Bay
February 10	Management Committee	Whistler
February 11-13	Executive Council	Whistler
February 16	Federation of Dental Societies	Montreal
February 17-20	Meeting re: FDI '94	Chicago
February 24	S. S. M. & District Dental Society*	Sault Ste. Marie

February 25	Membership Telephone Blitz	Ottawa
March 4-6	BC Dental Meeting	Vancouver
March 10	Kingston & District Dental Society*	Kingston
March 11-13	ADA/CDA Management	Ottawa
March 25	Essex County Dental Society* (represented by Dr. Wenn)	Tecumseh
March 25	CDA/ODA Management	Toronto
March 25	I. Manji/Experdent	Ottawa
April 1	U.B.C. Professional Development	Vancouver
April 16, 17	Atlantic Provinces Executive	Moncton
April 24	UWO Professional Development Seminar	London
April 28-May 1	CDA Annual Dental Meeting	Toronto
April 30	Management Committee	Toronto
May 1	Interim Meeting Board of Governors	Toronto
May 3	Montreal Dental Society	Montreal
May 3-5	H & W Workshop on TB & HIV (represented by Dr. Steggle)	Toronto
May 6	Niagara Peninsula Dental Society*	Ste. Catharines
May 6-8	Newfoundland Dental Association	St. John's
May 14	CDA/CDSPi Management	Toronto
May 14,15	ODA Board Meeting	Toronto
May 16 - 21	Les Journées dentaires	Montreal
May 17	CFDE Annual Meeting	Ottawa
May 21, 22	New Brunswick Dental Society	Fredericton

May 25	McGill University Graduation	Montreal
May 27 - June 1	Alberta Dental Association Annual Meeting and Convention	Jasper
June 4	University of Western Ontario Grad Luncheon	London
June 10	Reception for Dr. Barolet (Dr. Dolman)	Montreal
June 11	University of Toronto Grad Luncheon	Toronto
June 17	Management Committee	Ottawa
June 18, 19	Executive Council	Ottawa
June 20	CDHA Board of Directors	Ottawa
June 19, 21	ACFD Annual General Meeting(Dr. White)	Saskatoon
June 21	EDI Conference	Toronto
June 24 - 27	Annual Convention College of Dental Surgeons, Saskatchewan	Saskatoon
June 24 - 27	University of Saskatchewan, College of Dentistry 25th Anniversary	Saskatoon
June 24	Royal College of Dental Surgeons of Ontario 125th Anniversary Dinner (represented by Dr. Wenn)	Toronto
July 17-21	Academy of General Dentistry Annual Meeting	San Diego
July 28	Retirement Dinner for BGen. Begin (represented by Dr. Crawford)	Ottawa
August 5,6	Dental Officers Training Program Graduation	CFB Borden
August 7	Canadian Association of Optometrists Annual Meeting (represented by Dr. Wenn)	Charlottetown
August 12	CDA/ODA Management Meeting	Toronto

August 17	CDA Mgmt. Conf. Call Re: FDI '94 (Mgmt./Dr. Jahjah)	
August 26-29	Canadian Academy of Endodontics	Deerhurst
August 28	Royal College of Dentists of Canada Convocation (represented by Dr. Somer)	Toronto
September 1	University of Toronto Welcome	Toronto
September 9	Management Committee	Ottawa
September 10,11	Annual Meeting Board of Governors	Ottawa
*::	CDA/ODA Speakers' Tour	

CDAnet COMMITTEE

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Don MacFarlane, Chairman, British Columbia
Dr. Mac Balfour, Ontario
Dr. Bill Glave, Ontario
Dr. Don Gutkin, Manitoba/Saskatchewan
Dr. Luc Dugal, Alberta

Executive Liaison: Dr. Toby Gushue, Atlantic Provinces

Staff: Ms. Patricia Duminy
Ms. Susan Matheson

1. Committee Meeting

The CDAnet Committee has met once since the report to the 1993 CDA Interim Board, on May 2, 1993.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

2. CDAnet PLUS (CDAnet Value Added Services)

Dr. MacFarlane provided a verbal update on Value Added Services. He reported on the notification of the sale of VCS Technologies and the difficulties encountered for CDAnet PLUS. He indicated legal counsel was being consulted regarding damages to CDA for the breach of contract.

3. CDAnet Statistics

The number of offices and dentists on CDAnet, per province as of July 15, 1993:

<u>Province</u>	<u>No. of Offices</u>	<u>No. of Dentists</u>
Alberta	122	203
BC	127	212
Manitoba	55	112
New Brunswick	8	13
Nova Scotia	13	34

Newfoundland	9	19
N.W.T.	2	8
Ontario	533	974
P.E.I.	1	1
Quebec	65	101
Saskatchewan	17	28
Yukon	0	0
	---	---
TOTALS	952	1705

The amount of revenue received for the CDAnet project as of June 1, 1993 for Shared Health Network Services (SHNS) is \$34,758.03 and for National Data Corporation (NDC) the amount is \$32,725.15 for a total of \$67,483.18.

4. CDAnet Certified Software Vendors

As of May, 1993, the following software companies have completed Certification with both networks and CDA:

Abel Computer Systems Ltd.	Alpha Bytes Computer Corp.
APG Computing Inc.	Autopia Computer Products
Computer Station	CLG Computer Consulting Inc.
Cortex Computer Systems	Core Systems
DMS	Dialog Medical Systems Inc.
Exan	Domtrak
Genie (Ho & Assocs.)	Execu-dent
Logic Tech	Harr-Comm Technology
Maxim	Healthcare Communications
Norburn	Medical Dental Data Systems
Zadall Systems Group Inc.	Pharmaid

5. **Insurer Participation and Status**

The following insurance companies are processing claims on a REAL TIME basis:

Sun Life	Canada Life
Great West Life	Mutual Life
Confederation Life	Aetna
National Life	Alberta School Employee Benefit Plan
Prudential Insurance of America	

The following companies are processing claims on a BATCH basis:

Metropolitan Life, Manulife, Ontario Blue Cross

6. Dr. MacFarlane and representatives from the College of Dental Surgeons of B.C. continue to meet with MSA and CU&C to bring them into CDAnet. Negotiations continue to take place with the various Blue Cross companies across the country as well, to bring them into CDAnet.
7. As of June 1, 1993, CDAnet is pleased to begin transmitting electronic claims for the federal government employee dental plans in Canada. The Employer Certification requirement has been removed and this positive initiative by Great West Life will increase claims volume on CDAnet.
8. **Marketing**
- The CDAnet Booth was an exhibitor at the B.C. provincial dental meeting and the CDA national meeting in Toronto. Both meetings received extremely positive responses from dentists and their staff.
9. The CDAnet Management Committee continues to meet to provide an effective mechanism for communication regarding CDAnet and CDAnet PLUS (Value Added Services) issues.

10. **Chairman's Remarks**

I wish to thank the Committee members for their continued support in the promotion and marketing of CDAnet. I also wish to thank Pat Duminy and Susan Matheson for their efforts in support of the CDAnet Committee.

Respectfully submitted,

Don MacFarlane, D.M.D.
Chairman, CDAnet Committee

FILING OF REPORT

The Board of Governors receives with appreciation the report of the CDAnet Committee as information.

COMMITTEE ON COMMUNITY & INSTITUTIONAL DENTISTRY

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

- Members:** Dr. Wayne Stegges, Chairman, Smith Falls
Dr. David Chimilar, Winnipeg
Mr. Alf Dolan, Toronto
Dr. Neil Farrell, London
Dr. John Hardie, Vancouver
Dr. Trey Petty, Calgary
Dr. Geoff Smith, St. John's
Dr. Wayne Stegges, Smith Falls
Ms. Jackie Smorang, Calgary
Dr. Julian Tsafaroff, DVA, Toronto (Observer)
- Executive Liaison:** Dr. Toby Gushue, St. John's
- Senior Staff:** Mr. Brian Henderson, Director, Professional Services
- Coordinator:** Mrs. Danuta Askew

1. Committee Meetings

The Committee on Community and Institutional Dentistry has not met since its report to the Interim Meeting of the CDA Board of Governors. The next Committee meeting is scheduled for October 14, 1993.

ITEMS REQUIRING BOARD ACTION

2. Infection Control Guide

At the 1993 Interim Meeting of the CDA Board, the Committee noted that a draft CDA Infection Control Guide had been approved by the Committee and circulated to provincial Corporate Members and Licensing Authorities. The intent was to permit further revision of the document prior to Board approval. This has now been accomplished and the Infection Control Guide is being presented for approval of the Board. If approved, it will be forwarded to the CDA Communications Department for editing/formatting for publication.

RESOLVED:

- 93.42** **THAT the "Infection Control Guide" be approved by the Board of Governors as a CDA resource for clinicians.**

The Board of Governors refers the document back to the Committee for consultation with corporate members and re-circulation, prior to further presentation to Governors for approval.

The Committee on Community and Institutional Dentistry believes that the Infection Control Guide is a resource which will be of interest and value to the CDA members.

RESOLVED:

- 93.43** **THAT the Infection Control Guide be distributed to CDA members as a membership benefit.**

The Board of Governors defers its decision pending approval of the document.

3. **Revision of Fluoride Supplementation Policy**

In May 1993, the CDA Board of Governors approved the current Association policy on Fluoride Supplementation (see Appendix I). The Board is asked to consider a slight revision which would involve substituting the word "may" for the word "should" in statement number one of the policy. The change, which has been requested by British Columbia, is felt to strengthen the profession's support for fluoride supplementation without affecting the flexibility of the guidelines. While Executive Council has not had an opportunity to review this topic, it is felt that the time and effort required by further Committee review and submission to the next Board meeting might be saved as general support for this revision is anticipated.

RESOLVED:

- 93.44** **THAT the approved CDA Policy on Fluoride Supplementation be revised to replace the word "may" in statement one (1.) with the word "should".**

APPENDIX I**ADOPTED**

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

4. **Teaching Conference**

The Teaching Conference on Hospital Dentistry will be held in Toronto on October 15 and 16, 1993. Members of the Committee will be attending the conference and a report of the discussion and workshops will be included in the Report to the Board.

5. **Summary**

In conclusion, the Chairman thanks his Committee members for their contribution and continued support and the CDA staff for their valuable assistance.

Respectfully submitted,

Wayne Steggles, D.D.S., Chairman
Committee on Community & Institutional
Dentistry

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Committee on Community and Institutional Dentistry.

The Canadian Dental Association continues to support the use of fluorides in the prevention of dental caries as one of the most successful preventive health measures in the history of health care. The availability of fluorides from a variety of sources, however, is a current reality which the practising dentist needs to take into account in dealing with patients. This is particularly true of children under the age of six, where exposure to more fluoride than is required simply to prevent dental caries can cause dental fluorosis. There is no evidence of any health problems being created by such exposure, but it is prudent to attempt to limit exposure to the optimal levels required for continuing protection. Current levels of fluoride intake from all sources are difficult to establish for any given area, but the dentist should consider general intake to the extent possible in recommending fluoride supplementation. The following general guidelines are consistent with these principles:

1. Fluoride supplementation should be recommended only for individuals or groups at high risk to dental caries where the estimation of the mean fluoride ingested from all sources indicates a need.
2. The estimation of the mean fluoride ingestion from all sources should include all home and child care water sources and the possible impact of fluoride reducing factors such as the use of water filtration devices within the home.
3. Fluoride supplementation dosages for individuals or groups at high risk to dental caries is based on the age of the individual and the fluoride level of their water supply.
4. Chewable tablets or lozenges are the preferred forms of fluoride supplementation. Drops may be required for special care patients.

**FLUORIDE SUPPLEMENT DOSAGES FOR INDIVIDUALS OR GROUPS
AT HIGH RISK TO DENTAL CARRIES
BASED ON FLUORIDE LEVEL IN WATER SUPPLY**

AGE OF CHILD	DOSAGE OF DAILY SUPPLEMENT	
	Fluoride in water supply <0.3 ppm (mgpL)	Fluoride in water supply ≥0.3 ppm (mgpL)
< 3 years	not recommended	not recommended
3,4,5 years	0.25 mg (0.5 mg if no regular use of fluoridated toothpaste)	not recommended
6-13 years	1.0 mg	not recommended

Approved by the Board of Governors
Canadian Dental Association
September, 1993

COMMITTEE ON CONSUMER PRODUCTS RECOGNITION

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Members:	Dr. Michael Eggert, Chairman, Edmonton Dr. Edward C.S. Chan, Montreal Dr. Hardy Limeback, Toronto Dr. Hurinder S. Sandhu, London Dr. Daniel Haas, Toronto
Executive Liaison:	Dr. John Diggins, Vancouver
Observer:	Dr. Mona Akoury, Health & Welfare Canada
Senior Staff:	Mr. Brian Henderson, Director, Professional Services
Coordinator:	Mrs. Christiane Dowsing

1. Committee Meeting

The Committee on Consumer Product Recognition has held one meeting since the 1993 Interim Meeting of the CDA Board of Governors; the meeting was held on June 4, 1993.

ITEMS REQUIRING BOARD ACTION

2. Assignment of Committee responsibility for Submissions for Recognition of Therapeutic Products

Two applications have been received requesting recognition for products which would fall within the definition of "therapeutic products". One is for recognition of Peridex, Procter and Gamble's chlorhexidine based product available for prescription by the dentist. Since the product is a product for professional use, it falls within the terms of reference of the Committee on Dental Materials and Devices. At the same time, because the Committee on Consumer Products Recognition has a program for recognition of products effective against gingivitis, existing contracts and processes within the jurisdiction of the Consumer Products Recognition Committee Could readily apply.

The Committee has also received a request to consider the addition of dentinal sensitivity agents as a new category of recognition. The product in question is already recognized for fluoride content. The Committee discussed the possibility of introducing this category of recognition, but agreed that this would entail taking on the responsibility for the assessment of therapeutic products.

Members of the Committee felt that acceptance of such responsibility would require additional committee time and additional time from committee members. It was agreed that the dental sensitivity products were of considerable interest and that CDA recognition was appropriate.

The Committee would appreciate direction from the Board of Governors in dealing with these requests for product recognition and consideration of the related need for additional resources to support the new responsibility for therapeutic products.

RESOLVED:

- 93.45 **THAT the Committee on Consumer Products Recognition review a proposal from Procter & Gamble for recognition of Peridex as a product recognized for Professional Use under guidelines, contracts and processes employed for Consumer Products Recognition.**

ADOPTED

The Committee suggests that the Executive Council of the Board of Governors give consideration to the question of revision of committee terms of reference to formalize a means of dealing with therapeutic products within the CDA committee structure and resources.

RESOLVED:

- 93.46 **THAT the Chairman and Executive Liaison bring forth recommendations for changes to the Committee's Terms of Reference, for Board approval.**

ADOPTED

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

3. A Dynamic Recognition Process

The Committee discussed that the product recognition process needs to remain dynamic. For example, it is possible that in future new elements could prove more efficacious than elements in recognized products. It is also possible that a product could gain recognition on the basis of clinical trials which are later found to be deficient in some critical dimension as evidenced in new clinical trials.

The Committee agreed that there is a need to review the recognition contract to examine that CDA is able to terminate the contract in such cases. It was agreed that the process should include a consultation and a grace period. It was also decided that a product's recognition should be reviewed when 2 full clinical trials demonstrate that the product is not efficacious or significantly less efficacious than a new development.

It was acknowledged that two full clinical trials would provide enough evidence to open the issue and require the company to supply evidence supporting their claim.

The Committee will use this position as the basis for a process of review of products which have been awarded the CDA Seal of Recognition.

4. **Identification of Additional Compensation for Project Fees and Expenses**

The Committee is incurring a large amount of work in reviewing advertisements and product submissions from manufacturers and would like a policy established to deal with this issue. The Executive Liaison will bring a request to Executive Council for guidance on compensating committee members for product reviews and other major committee assignments requiring technical expertise and time beyond that reasonably expected on the basis of routine committee obligation.

Executive Council agrees and directs the Director of Professional Services to review members' time commitments under current CDA policies, and to report back to Executive Council.

5. **Tooth Whiteners**

As a follow up to a meeting between Health and Welfare Canada and members of the Consumer Products Recognition Committee, committee members will provide scientific evidence of the effect of tooth whiteners on tissue structure to Health & Welfare Canada. The Committee will respond to Mrs. Kasperek and follow up at future meetings.

6. **Products Awarded CDA Recognition**

The following products were awarded the CDA Seal of Recognition for caries.

Colgate Fluoride Gel with Baking Soda
Colgate Fluoride Toothpaste with Baking Soda
Warner-Lambert Trident Sugarless Chewing Gum (10 flavours)

7. **Request for recognition of Sugar Free Lozenges**

The Committee received a request to recognize sugar free lozenges under the umbrella of the Food Product Program. There are no guidelines in place at the moment, but the committee will consider the development of guidelines and will respond to the manufacturer.

8. **Recognition of Dr. Brad Chapple**

Members were informed that Dr. Brad Chapple had completed his term with the Consumer Products Recognition Committee. It was felt that as a long serving member of the committee he should be presented with a letter of appreciation and a vote of thanks for his services as a reviewer and committee member.

9. **Guidelines for Conflict of Interest**

In light of committee members being asked to act as consultants or to respond to inquiries and demands from other provinces, a request was made for Executive Council to examine this issue and set up guidelines to deal with conflict of interest for committee members.

Executive Council notes that provision for Conflict of Interest guidelines is contained in the CDA Constitution and By-Laws.

10. **Revenue**

New initiatives such as chewing gum recognition have created increased revenue without violating the recognition program's fundamental commitment to public service.

11. CPR Database

The CPR Database is being reviewed on a continual basis as there is a need to review contracts and fees on an ongoing basis. The CPR Committee has the intention of using this information to update the membership on products recognized through the Seal of Recognition Program.

The CPR Committee wishes to thank Mr. Brian Henderson, Director, Professional Services and Mrs. Christiane Dowsing, committee coordinator for their assistance during the past year.

Respectfully submitted,

F. Michael Eggert, D.D.S., MRCD(C), M.Sc., Ph.D.
Chairman, Committee on Consumer Products Recognition

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Committee on Consumer Products Recognition.

CONVENTION COMMITTEE

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

General Chairman: Dr. Michel Jahjah

Executive Liaison: Mr. Jardine Neilson

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1. 1993 CDA Annual Dental Meeting - Toronto

The 1993 Canadian Dental Association Annual Dental Meeting was hosted by the Ontario Dental Association and held in Toronto, Ontario April 28 - May 1, 1993. The program consisted of one day of limited attendance, hands-on courses (Wednesday, April 28th) followed by 3 days of scientific sessions during the convention proper. Exhibits were open on Thursday, April 29th from 9 am - 5 pm, on Friday, April 30th from 9 am - 5:30 pm and on Saturday, May 1st from 9 am - 1 pm.

The exhibit hall was at the Metro Toronto Convention Centre. Lectures were held at the Metro Toronto Convention Centre and L'Hotel. The total count for exhibitors was 225 with 363 booths.

a) 1993 Convention Hotels

All the blocks of rooms were filled and, in the weeks prior to the convention, we had to ask the hotels for supplementary blocks. Luckily, some of the hotels were able to give us additional rooms, all of which were used; we were therefore able to accommodate every delegate.

b) Exhibits

The exhibitors' comments received to date are extremely positive: this has been their most successful Canadian dental show ever. The dental trade exhibition was the largest ever held in Canada, with over 225 exhibitors for a total of 363 booths. Exhibitors have indicated that the 1993 Meeting was beyond their expectations, both in terms of business and exposure. There is already great enthusiasm for the 1994 FDI Congress.

c) Canadian Dental Assistants' Association (CDAA)

The CDAA once again participated under the same terms and conditions as set in previous years. Jeffrey Miller represented the interests of CDAA on the 1993 Convention Committee.

d) Canadian Dental Hygienists' Association (CDHA)

Participation by CDHA at the 1993 CDA Annual Dental Meeting was confirmed under the same terms and conditions as set in previous years. Lorraine Boomhour was the CDHA representative on the 1993 Convention Committee.

e) Ontario Dental Nurses and Assistants Association (ODN & AA)

The ODN & AA also participated in the CDA Annual Dental Meeting. Jeff Miller and Pat Miller Sampson represented the ODN & AA's interests on the 1993 committee. The ODN & AA also contributed \$7,500 to the 'Fun Night'.

f) Ontario Dental Hygienists Association (ODHA)

The ODHA also participated in the 1993 CDA Annual Dental Meeting. Lorraine Boomhour represented the ODHA's interests on the committee. I would also like to acknowledge the great effort made by the ODHA, under the direction of Jeannie Orchard, to promote the meeting to its members.

g) Convention Registration

The convention was, once again, offered as a membership benefit. Pre-registration deadline was initially March 5, 1993. However, due to the great amount of late registrations and requests for extension of this date, the actual final deadline was April 23. Dentists who were members of either the Canadian Dental Association or the Ontario Dental Association were offered free registration to the convention proper providing they pre-register before April 23. Non-member dentists were required to pay a fee of \$155.00 this year.

h) Scientific Program

The 1993 Scientific Program was the CDA Conventions' most comprehensive program to date. Four limited attendance sessions were offered at L'Hotel on Wednesday, April 28th. Both the Endodontics hands-on course and the Implants hands-on course were sold out in the early stages of advance registration. A second

Endodontics course was added at the last minute to accommodate the numerous dentists who were on the waiting list for the first course.

The Convention Proper featured more than 55 clinicians. Most sessions were 2.5 hours in duration, which enabled participants to attend a greater amount of presentations. In addition to the scientific program for dentists, numerous lectures were tailored to meet the needs of dental hygienists, dental assistants and administrative staff. This year's scientific chairman, Dr. Dick Ito, also developed an extensive mini-clinic program, featuring over 40 participants during the convention, which proved to be very popular.

This year, certification for individual lectures was made available to all delegates. Monitors stationed in front of each lecture room handed out continuing education slips at the end of each presentation. The slips were to be filled out by the delegate and sent in to his or her licensing body or association.

The scientific program was one of the best ever developed for the benefit of the Canadian Dental Community. All the presentations, including 52 scientific sessions, 44 mini-clinics and 32 table clinics, were well attended. Compliments regarding the quality of the presentations are still being received from delegates.

i) Details Regarding 1993 Interim Board Meeting

The 1993 Interim Board Meeting was held in Rooms 105 at the Metro Toronto Convention Centre on Saturday, May 1st. The luncheon was held in Room 104D.

Members of the Executive Council and Board of Governors were housed at the L'Hotel and the Royal York Hotel.

j) ICD Participation (International College of Dentists)

The International College of Dentists held its activities at the Royal York Hotel. ICD Convention delegates who required hotel accommodations were requested to complete the regular Hotel Reservation form utilized by Convention delegates and these were forwarded to the CDA Convention Housing Bureau by March 5, 1993.

k) Canadian Association of Paediatric Dentistry

The Canadian Association of Paediatric Dentistry co-sponsored two half-day presentations delivered by Dr. Jack Dale on the topic of paediatric dentistry.

1) Social Functions

The Opening Ceremony was held at the Metro Toronto Convention Centre on Thursday, April 29 from 5:00 pm - 7:00 pm, was the highlight of the Social Program. Sponsored by Ash Temple, this event featured a spectacular performance by Toronto's Famous People Players, in addition to a heart-warming performance by The Children's Opera and a limbo presentation by the Caribbana Dance Troupe. The Ceremony was followed by a dinner, La Cage evening - a Las Vegas style revue with amazing impersonations - and the Party Lights Dance, all of which were held at the Metro Toronto Convention Centre.

It would seem that we have set new standards for our Opening Ceremony which must be followed in years to come.

The traditional President's Gala was held on Friday, April 30th at L'Hotel. The theme chosen for the evening was 'A Cavalcade of Cultures' and a prize was awarded for the best costume. During the buffet dinner, the musicians moved from table to table and played the guests' favorite tunes. Tickets were \$75.00 per person.

m) Sponsorship - 1993 CDA Annual Dental Meeting

Several groups, organizations and suppliers sponsored events and activities this year during the 1993 CDA Annual Dental Meeting. Listed below is a summary of this year's sponsors:

Ash Temple	Opening ceremony/program book ad
Aurum Ceramic/Classic	Delegate kits/jeep for exhibitor draw/ program book ad/Thomas Olson lecture
Bell Canada	courtesy phones in Exhibit hall/ seats for Jays game at SkyDome for pre-registration draw
Butler	program book ad
Caulk Canada	Dr. Ross Nash presentation/program book ad
Canadian Dental Service Plans Inc.	note pads/Harris-Lamantia-Gallant lecture

Dairy Bureau of Canada	cheese breaks
Exan	computer equipment/message centre/Devries
	lecture
Healthco	program book ad/Fun Night/Walter Hailey
	lecture
Healthgroup Financial	Fun run
Henry's Camera	photography contest
H-Wave Canada	Dr. Stanley Malamed presentation
Kerr Canada	Dr. Donald Yu hands-on presentation
LeValliant & Associates	Lunch - Friday, April 30/financial
	presentation
Nobelpharma	Dr. Torsten Jemt hands-on course
Procter & Gamble	Dr. Christopher Clark lectures
Wright Dental	Dr. Karl Leinfelder presentation

* * *

Canadian Academy of Oral Medicine	Dr. Tom Daley & Dr. Gillian
University of Western Ontario	McCarthy lectures
Canadian Association of Orthodontists	Dr. Eugene Roberts lecture
Canadian Association of Paediatric Dentists	Dr. Jack Dale lecture
Canadian Fund for Dental Education	Fiona McCall/Paul Howard
ODA Dentists at Risk Committee	Dr. Chris Christianson
Toronto Hospital for Sick Children	Drs.Judd/Johnston/Kenny/Yacobi
ODN & AA	Fun Night
University of Toronto	full day periodontal symposium

n) Final Attendance Figures

The official attendance figures for the 1993 CDA Meeting are as follows:

Dentists	3,443
Dental Assistants	1,770
Dental Hygienists	873
Dental Technicians	<u>37</u>
	6,123
Exhibitors	1,400
Accompanying persons/ Spouses/Guests/Children General Categories/ Staff (CDA, ODA)	<u>1,487</u>
Grand Total	9,010

2. 1993 Out-of Country Seminar Program

The out-of country seminar program continues to be well received. As FDI (Fédération Dentaire Internationale) 1993 draws closer enquiries are being received more frequently. Reports from Tourcan Vacations are positive and indicate that Canadian participation in FDI 1993 is solid. An out-of-country seminar booth was set up in the Registration area to promote the program during the 1993 CDA Meeting.

3. 1994 Fédération Dentaire Internationale Congress Update (FDI)

Planning for the 1994 FDI Congress is under way. Exhibitor packages have now been sent to companies in Canada and the United States and will shortly be sent to international companies as well. The preliminary program, which will be distributed at the 1993 FDI Congress in Sweden, is presently being translated into the official languages: French, German and Spanish.

The Organizing Committee consists of the following:

Dr. Michel Jahjah, General Chairman
Dr. Marcia Boyd
Dr. Robert Clarke
Dr. Ron Markey
Dr. Ted Ramage
Dr. Jim Stich

Vancouver is a very busy city, and we expect that the blocks of rooms and programs will sell very quickly. I would therefore ask the cooperation of the Board members in urging dentists to register early so that we can ensure a substantial Canadian participation.

An agreement regarding the hosting and organization of the 1994 Congress was reached with FDI last February. A detailed update will be submitted prior to the August Board of Governors meetings.

4. CDA Conventions Staff

The convention was not without its difficult moments. The departure of a senior planner, Janice Edgar, three weeks prior to the meeting was very stressing for both committee members and staff and caused some last minute planning changes. We were fortunate in obtaining the services of Chantal Bally, a meeting planner who had been working out of Montreal for FDI 1994, and was familiar with CDA Conventions; in addition, Laura Lam who was in charge of hotels and registration, and Paula Gallant, greatly contributed to the success of the 1993 meeting. Laura and Paula are now working on FDI 1994. The team is growing: Madeleine McBrearty, an experienced planner, has just recently joined FDI 1994 and will be working out of Montreal.

Respectfully submitted,

Michel Jahjah, D.D.S.
General Chairman
CDA Conventions

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Convention Committee as information.

COMMITTEE ON DENTAL MATERIALS AND DEVICES

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Members:	Dr. Derek W. Jones, Halifax, Chairman Dr. Pierre Desautels, Montréal Dr. Leonard Johnson, London Dr. Burton Conrod, Sydney Dr. Peter Williams, Winnipeg Dr. Dennis Smith, Toronto
Executive Liaison:	Dr. Bernie White, Saskatoon
Observers:	Dr. Attar Chawla, HPB, Health & Welfare, Ottawa Ms. Linda Leinan, ISTD, Ottawa Mr. George Osterbauer, DIAC, Toronto
Senior Staff:	Mr. Brian Henderson, Director, Professional Services
Coordinator:	Mrs. Christiane Dowsing

1. Committee Meetings

The Committee has held one meeting since its report to the 1993 Interim Meeting of the CDA Board of Governors; the meeting was held on May 28, 1993.

ITEMS REQUIRING BOARD ACTION

2. Canadian Dental Research Foundation Award

Every two years, the Committee on Dental Materials and Devices invites applications from dental students for a \$2,000. award in support of a student research project. This year, twenty-two (22) applications were received and reviewed.

RESOLVED:

93.47 THAT the 1993 CDRF Award of \$2,000. be granted to Mr. Guy Gagnon, for his paper on "Cloning, Sequencing and Expression in Escherichia Coli of the PTS I Gene Encoding Enzyme I of the Phosphoenolpyruvate: Sugar Phosphotransferase Transport System From Streptococcus Salivarius"; and,

THAT the CDRF Trophy be delivered to the Dean of the University of Laval, Faculty of Dentistry, the location where Mr. Gagnon carried out his research.

ADOPTED**ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION**

3. CDA Professional Recognition Program and Toothbrush Statement Program

The Committee reviewed an application submitted by Procter & Gamble to have a toothbrush recognized by the Canadian Dental Association under the Toothbrush Statement Program. The committee discussed plans to adapt the present toothbrush contract to allow both the seal and the statement to appear on packaging, under conditions similar to those specified in the Consumer Products Recognition contract. The toothbrush contract will be revised as approved by the Board, resolution 93-17, and the criteria for approval will be demonstration of compliance with the International Standards Organization Standard and/or draft thereof and the process will involve a principle reviewer appointed by the Committee. Procter and Gamble will be informed that their application be re-submitted under the terms of the new revised contract.

4. Direct Importation and Regulation of Dental Products

The Committee reviewed correspondence included in the resource material relating to concerns with direct mail importation and federal regulation of dental products. These are complex issues and the Dental Industry Association of Canada (DIAC) has recognized a number of problems. It was noted, for example, that a fluoride bearing cement may require a Drug Identification Number or may not, depending upon the product's name. If fluoride is mentioned, the product is regulated. If not, the product is not subject to regulation, even with the same ingredients. The committee agreed that a meeting be arranged between members of the Dental Materials Committee, the DIAC representative and officials of Health and Welfare to discuss these issues.

5. Procter & Gamble Proposal to provide additional funding for the CDRF Award Program

Mr. James O'Reilly of Procter & Gamble met with the committee and reported that Procter & Gamble have a developing interest in the health field and the desire to make this interest more visible and apparent through selective funding of research, clinical or educational projects in the dental field. His attendance at the meeting of this committee was primarily related to the committee's responsibility for the Canadian Dental Research Foundation Award (CDRF). Committee discussion helped confirm a decision that Procter & Gamble may be interested in funding a similar kind of research award. The Committee Chairman will draft up terms of reference for the proposed CREST Research Award. Mr. Henderson, following up on earlier discussion with representatives of Procter & Gamble, is also preparing a proposal for regular CDA/CREST conferences on scientific, clinical or educational issues important to the dental profession. Mr. O'Reilly is very interested in pursuing both of these issues.

6. Mercury

The committee reviewed the latest article by Vimy et al. This article was reviewed by Dr. Derek Jones as well as three other reviewers and responses to date have identified a number of concerns with respect to methodology. The committee emphasizes that scientific studies should not be presented by press release but published and subjected to the usual process of peer review and refinement or corroboration.

7. Composition of the Committee

The issue of changes in membership on CDA committees was discussed and several members of the Dental Materials & Devices committee were happy to provide names of potential new members. As some terms are concluding over the next two or three years, there is a concern to maintain continuity and expertise as well as introduce new members.

8. Orascan Correspondence

The committee received a request to have a cancer detecting oral rinse recognized by the Canadian Dental Association. The committee members were concerned about introducing a new category of recognition for such diagnostic products without advice from individuals expert in oral pathology. The committee decided to seek the advice of the Canadian Academy of Oral Pathology before making any kind of decision.

9. **Appreciation**

I would like to express my appreciation to the members of the Committee, the representatives from DIAC and the Department of Industry, Science and Technology, the observers from Health & Welfare and the staff for their cooperation and effort involved in maintaining programs operated under the Committee's authority and for productive discussion, at each meeting, of issues of current concern. The committee wishes to pay tribute to Dr. Ralph Barolet for his work with the Dental Materials and Devices Committee and record thanks for his leadership and dedication. Dr. Barolet has been presented the CDA Award of Merit for his work with the Committee and his outstanding contribution in support of the CDA.

I also wish to thank Brian Henderson, Director of Professional Services, and Christiane Dowsing, Committee Coordinator, for their efforts during the past year on behalf of the Committee.

Respectfully submitted,

Derek W. Jones, BSc, PhD, FIM., CChem,
FRSC(UK), FADM, Chairman
Committee on Dental Materials and Devices

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Committee on Dental Materials and Devices.

COMMITTEE ON ETHICS

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Members: Col. Morley Deyette, Chairman, Borden
Dr. Blake Creaser, New Germany
Dr. Brian Leroy, Edmonton
Dr. Peter Lobb, Victoria

Executive Liaison: Dr. Richard Sandilands, Edmonton

Senior Staff: Mrs. Sandra Davis

Coordinator: Ms. Martyne S. Giroux

1. Committee Meetings

Since reporting to the the August 1992 Annual Meeting of the Board of Governors, the Committee on Ethics has not met.

ITEMS REQUIRING BOARD ACTION

2. Canadian Medical Association - Policy on Physicians and the Pharmaceutical Industry - Adaptation to Dentistry

APPENDIX I

The Canadian Medical Association sent the CDA a policy summary on Physicians and the Pharmaceutical Industry. This document was circulated to CDA Corporate Members, Specialty Sections, Licensing Authorities and other CDA Councils/Committees for review and comment on the appropriateness and requirement for a similar policy statement from the CDA. A summary of the responses is attached which indicates interest but no consensus that CDA guidelines are necessary.

APPENDIX II

The Committee requests Board direction on continuing activities to develop a CDA policy statement.

RESOLVED:

- 93.48** **THAT** the Committee continue to monitor this area, and if it is determined a CDA policy is required, to bring forth a policy for Board approval.

ADOPTED

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

3. Code of Ethics

CDA continues to receive favourable comments on the CDA Code and numerous requests for additional copies.

Respectfully submitted,

Col. Morley Deyette, Chairman
Committee on Ethics

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Committee on Ethics.



MEMORANDUM

March 1, 1993

TO: Presidents and CEOs - Corporate Members
Presidents and CEOs - Specialty Sections
President and CEOs - Licensing Authorities
Consumer Products Recognition Committee
Committee on Dental Materials and Devices
Committee on Community and Institutional Dentistry
Council on Education
General Chairman, Conventions

**CANADIAN
DENTAL
ASSOCIATION
L'ASSOCIATION
DENTAIRE
CANADIENNE**

FROM: Col. Morley Deyette, Chairman, Committee on Ethics

**SUBJECT: CMA Policy Summary - Physicians and the
Pharmaceutical Industry - Adaptation to Dentistry**

The Canadian Medical Association Committee on Ethics is in the process of revising the CMA Policy Summary - Physicians and the Pharmaceutical Industry. Copies of the existing policy summary and the latest proposed revision to this document have been brought to the attention of the CDA Committee on Ethics.

As noted in the introduction to the policy statement, the focus of the guidelines is on pharmaceutical companies. However, the principles stated in the document apply to the relationship between physicians and manufacturers of medical devices, health care products and service suppliers in general. Although many aspects of the document are more applicable to the medical profession, an initial assessment indicates that some aspects are appropriate and may be beneficial to the dental profession. The purpose of a CDA document on this topic would be the provision of guidance for ethical decision-making and behaviour by dentists in regard to their responsibilities to patients, the profession and to the public.

Prior to any developmental work by the CDA Committee on Ethics with regard to CDA ethical guidelines, I would appreciate receiving input from you on the appropriateness of national guidelines in this area. Also, I would appreciate knowing whether or not any guidelines or regulations currently exist in your jurisdiction on this topic. Any documentation available would be appreciated for the Committee's review.

Thank you for your cooperation.

c.c.: Committee on Ethics



Canadian
Medical
Association

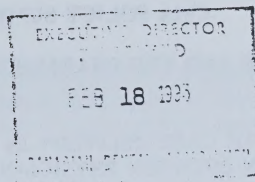
Association
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February 11, 1993



NOTICE TO RESPOND
ON
REVISION OF CMA POLICY SUMMARY
PHYSICIANS AND THE PHARMACEUTICAL INDUSTRY

From: John R. Williams, Ph.D., Director,
Department of Ethics and Legal Affairs

At its meeting on February 8-9, 1993, the CMA Committee on Ethics prepared a draft set of amendments to the CMA Policy Summary, **Physicians and the Pharmaceutical Industry**. A copy of the amended document is appended to this notice, along with a set of unofficial notes explaining the reasons for the more significant changes. The Committee invites comments on its proposals for changes, as well as on those sections which it has decided to leave as is. In order to meet the deadline for submissions to the 1993 CMA General Council, your comments will have to be received no later than **April 15, 1993**. The Committee will consider all comments received in making its final recommendation for amendments to General Council.

If you have any questions about this process, please do not hesitate to contact me.

Thank you for your attention to this matter. I look forward to your response.

JRS/mb

Enclosure

PHYSICIANS AND THE PHARMACEUTICAL INDUSTRY

THE HISTORY OF HEALTH CARE DELIVERY IN CANADA HAS BEEN MARKED BY CLOSE COLLABORATION BETWEEN PHYSICIANS AND THE PHARMACEUTICAL AND HEALTH SUPPLY INDUSTRIES, WITH THIS COLLABORATION EXTENDING TO RESEARCH AS WELL AS TO EDUCATION. SINCE MEDICINE IS A SELF-GOVERNING PROFESSION, PHYSICIANS HAVE A RESPONSIBILITY TO MAKE SURE THAT THEIR PARTICIPATION IN SUCH COLLABORATIVE EFFORTS IS IN KEEPING WITH THE DUTIES THEY HAVE TOWARD THEIR PATIENTS AND TOWARD SOCIETY AT LARGE. THE FOLLOWING GUIDELINES HAVE BEEN DEVELOPED BY THE CMA TO ASSIST PHYSICIANS IN DETERMINING WHEN A RELATIONSHIP WITH INDUSTRY IS APPROPRIATE.¹ ALTHOUGH DIRECTED PRIMARILY TO INDIVIDUAL PHYSICIANS, THE GUIDELINES ALSO GOVERN THE RELATIONSHIPS OF INDUSTRY AND MEDICAL ASSOCIATIONS.² SECTIONS OF THESE GUIDELINES HAVE BEEN DEVELOPED MORE FULLY BY OTHER BODIES, AND PHYSICIANS CAN REFER TO THEIR DOCUMENTS FOR FURTHER GUIDANCE ON THESE ISSUES.³ ALTHOUGH THESE GUIDELINES FOCUS ON THE PHARMACEUTICAL COMPANIES, THE CMA CONSIDERS THAT THE SAME PRINCIPLES APPLY TO THE RELATIONSHIP BETWEEN ITS MEMBERS AND MANUFACTURERS OF MEDICAL DEVICES, INFANT FORMULAE AND SIMILAR PRODUCTS, AND HEALTH CARE PRODUCTS AND SERVICE SUPPLIERS IN GENERAL.

General principles

1. The primary objective of professional interactions between physicians and industry should be the advancement of the health of Canadians rather than the private good of either physicians or industry.
2. The relationship between physicians and industry must always be in keeping with the fundamental ethical principles that govern social interactions in general.
3. The relationship between physicians and industry is guided further by CMA's Code of Ethics.
4. ~~The interactions between physicians and industry must always respect the fundamental values of Canadian society insofar as these values do not conflict with the fundamental principles of ethics.⁴~~
The practising physician's primary obligation is towards the patient. Relationships with industry are appropriate only insofar as they do not affect the fiduciary nature of the physician/patient relationship.

5. Physicians should resolve any conflict of interest between themselves and their patients resulting from interactions with industry in favour of their patients.⁵ In particular, they should avoid any self-interest in their prescribing and referral practices.
6. In any relationship between a physician who is not an employee of the pharmaceutical industry and the industry itself, the physician should always maintain professional autonomy, independence and commitment to the scientific method. The physician should be prepared to disclose the nature of such relationships to his or her patients, to the organizers and audience of a CME event at which he or she is a speaker, and in comparable situations.⁶

Research

7. A prerequisite for physician participation in industry-sponsored research activities is evidence that these activities are ethically defensible, socially responsible and scientifically valid.
8. The participation of physicians in industry-sponsored research activities should always be preceded by formal approval of the project by an appropriate ethics review body. The project should also be subjected to an ethical evaluation by that body upon its completion. Such review research should be conducted according to the national guidelines of the sort promulgated by such bodies as the Medical Research Council of Canada and the National Council on Bioethics in Human Research.

Surveillance studies

9. Physicians should participate only in surveillance studies (i.e., phase 4 research studies) that are scientifically appropriate for drugs relevant to their area of practice. The degree and manner of their participation should be in keeping with generally accepted standards of ethical medical practice.
10. Physicians participating in surveillance studies should avail themselves of appropriate resources to assist them in their decision-making. Review boards and ethics committees that already exist in their community may serve in this capacity. The National Council on Bioethics in Human Research is an appropriate resource for all Canadian researchers.

11. When institutionally based review boards are not available, participation in research and surveillance studies should be through coordinating agencies or bodies in each province/territory or region which can act as a central clearing house. These review boards, agencies and bodies should function as a resource for physicians in assessing the study's ethical acceptability and scientific value. Although these boards, agencies and bodies may be funded at arm's length by the pharmaceutical industry, they should be under the direction of the ~~medical profession~~ appropriately qualified health professionals and researchers working independently from industry.⁷
12. It is ~~ethically~~ acceptable for physicians to receive remuneration for participation in approved surveillance studies only if the participation exceeds the physician's normal practice pattern. This remuneration should not constitute enticement. It may, however, involve opportunity costs, i.e., the loss of otherwise available income to the physician as a result of participating in a surveillance study. Parameters such as time expenditure and complexity of the study may also be relevant considerations. The amount of the remuneration should be approved by the relevant review board, body or agency mentioned previously.
13. Incremental costs, i.e., additional costs that are directly related to the surveillance study, should not be defrayed by provincial or other insurance agencies regardless of whether these costs involve diagnostic procedures or patient services. Instead, they should be assumed by the pharmaceutical manufacturer.
14. Patient participation in surveillance studies shall occur only with the full, informed and competent consent of the patient. It is the physician's responsibility to ensure appropriate standards of informed consent in these matters. The physician of record has an obligation to ensure that the patient is (a) fully aware that the physician's concern for the patient's welfare is not contingent on the patient's participation in the study, (b) informed of available alternatives, with their comparative advantages and disadvantages and other related matters that would be disclosed for informed consent under normal circumstances, and (c) told that he or she may withdraw from the study at any time and return to the alternative therapies indicated if that is medically feasible. ~~If it is expected that this may not be possible the patient should be clearly informed of this at the outset.⁸ It is the physician's responsibility to ensure appropriate standards of informed consent in these matters.~~

The CMA ~~believes~~ considers that the guidelines proposed by the Medical Research Council of Canada on research involving human

subjects may serve as a useful basis for structuring and obtaining the relevant consent (*Guidelines on Research Involving Human Subjects*, Medical Research Council of Canada, Ottawa, 1987).

15. The physician of record who enrolls a patient in a surveillance study has an obligation to ensure the protection of the patient's identity if the patient so wishes. If the patient desires such protection but this cannot be guaranteed the physician should so inform the patient as part of the informed consent process.
16. It is expected that the results of any surveillance study will be made available for publication in a peer-reviewed journal within a reasonable period. Verification of this should rest with the relevant review board or agency concerned with the study.

Continuing medical education (CME)

17. The CMA makes a clear distinction between education, training (e.g., in the use of a medical device) and product promotion. Although these Guidelines apply to each of these activities, this section focuses on CME. Above all, CME activities should address the educational needs of the targeted medical audience.⁹
18. The ultimate decision on the organization, content and choice of CME activities shall lie in the hands of the physician-organizers.
19. CME organizers and their delegates must not be in a position of conflict of interest by virtue of any affiliation relationship with the company or companies that fund CME activities.
20. The ultimate decision on funding arrangements for CME activities should be the responsibility of the physician-organizers. Although the CME program may acknowledge the financial or other aid received it should not identify the products of the company or companies that fund the activities.
21. All funds from a commercial source should be in the form of an educational grant made payable to the institution or organization sponsoring the CME activity.¹⁰ Upon conclusion of a CME the activity, the physician-organizers should be prepared to present a statement of account for the activity to the funding organizations and other relevant parties.

22. Every effort should be made to use generic names rather than trade names in the course of CME activities. In particular, physicians should not engage in peer selling.¹
23. Negotiations for space or for types of promotional displays at CME functions should not be influenced by industry sponsorship of the activity.
24. Travel and accommodation arrangements, social events and venues for industry-sponsored CME activities should be in keeping with the arrangements that would normally be made without industry sponsorship. For example, industry should not pay for travel or lodging costs or for other personal expenses of physicians attending a CME event.¹¹ Subsidies for hospitality should not be accepted outside of modest meals or social events that are held as part of a conference or meeting. However, faculty at CME events may accept reasonable honoraria and reimbursement for travel, lodging and meal expenses. Scholarship or other special funds to permit medical students, residents and fellows to attend CME events are permissible as long as the selection of participants for these funds is made by their academic institution.

Clinical evaluation packages (samples)

25. Distribution of samples should be solely for the purpose of allowing physicians to evaluate the clinical performance of the medicaments outside of the context of post-marketing surveillance studies, to initiate therapy, or for a similar purpose. Any departure from this use must be justifiable in terms of otherwise applicable principles of ethical medical practice (such as justice in the distribution of medical care to disadvantaged people).
26. The distribution of samples should not involve any form of material gain for the physician or for the practice with which he or she is associated.
27. Physicians who accept clinical evaluation packages (samples) and similar devices ~~are responsible for keeping~~ should ensure that proper records of their receipt, storage and distribution ~~are maintained~~.¹²

¹Peer selling occurs when a pharmaceutical manufacturer directly sponsors a seminar or similar event that focuses on its own products and is designed to enhance the sale of those products. The manufacturer directly engages a physician to conduct the session; this form of participation would reasonably be seen as being in contravention of the CMA's *Code of Ethics*, which prohibits endorsement of a specific product. Peer selling, as understood in this sense, differs from the sort of situation in which a pharmaceutical manufacturer provides funds to CME organizers to sponsor a bona fide educational event on a specific condition or on specific products. In the latter event the control and structure of the CME event lies in the hands of the CME organizers. Even though the products may be the focus of such a bona fide event the arms-length nature of the sponsorship by the manufacturer and the fact that the control and structure of the event lie in the hands of the CME organizers remove it from the realm of advertising and do not constitute an endorsement of the products in question.

28. Physicians who accept clinical evaluation packages (samples) and other health care products are responsible for ensuring their age-related quality and security. They are also responsible for the proper disposal of unused samples.

Other considerations

29. For the purposes of these Guidelines manufacturers of medical devices, infant formulas and similar products, as well as medical services suppliers should be considered in the same light as pharmaceutical manufacturers.
30. Physicians should not dispense pharmaceuticals or provide diagnostic or other services for material gain unless they can demonstrate that these cannot be provided within a reasonable distance by an appropriate other party.
31. Physicians should not invest in pharmaceutical manufacturing companies or related undertakings if knowledge about the success of the company or undertaking might inappropriately affect the manner of their practice or their prescribing behaviour.
32. Practising physicians should not be affiliated with pharmaceutical companies if the nature of should not allow their affiliation to influences their medical practice inappropriately.
33. Practising physicians should not accept a fee or equivalent consideration from pharmaceutical manufacturers or distributors in exchange for seeing them in a promotional or similar capacity.
34. Practising physicians should not accept personal gifts from the pharmaceutical industry or similar bodies.
35. Practising physicians may accept patient-teaching aids appropriate to their area of practice provided these aids carry only the logo of the donor company and do not refer to specific therapeutic agents.

Medical students, interns and residents

36. These guidelines are meant to apply to physicians-in-training as well as practising physicians. Medical curricula should include formal training that is based on these deal explicitly with the guidelines.¹³

NOTES:

UNOFFICIAL EXPLANATIONS FOR THE MAJOR SUGGESTED AMENDMENTS

1. This addition is intended to clarify that the document is *ethical* in nature; its goal is to provide guidance for decision making and behaviour by physicians in regard to their responsibilities to patients, to the profession and to society. It represents an application of general medical ethics, as embodied in the Code of Ethics, to the specific area of interactions between physicians and industry.
2. This addition makes explicit what was implicit in the original version of the document.
3. Numerous organizations have elaborated at considerable length certain topics discussed briefly in this document, such as research, continuing medical education, samples, and the application of the guidelines to interns and residents.
4. This sentence was considered to be unnecessary.
5. This principle is basic to the guidelines and worthy of explicit mention.
6. This addition incorporates the widely cited criterion cited in the American College of Physicians position paper on this topic, namely: "Would you be willing to have these arrangements generally known?"
7. This section of the document identifies a problem and suggests a solution which has yet to be very widely adopted. Rather than delete it until such boards are established, it has been retained to encourage appropriate bodies to meet the need for institutional ethics review of research conducted by community based investigators.
8. This sentence was felt to be unnecessary.
9. This addition makes explicit what was implicit in the original version, namely that the guidelines apply to all interactions between physicians and industry.
10. This is a practical suggestion to complement the other guidelines in this section. It is consistent with the guidelines on funding continuing medical education which have produced by various organizations in the U.S.A.
11. Despite strong suggestions to the contrary, this section has not been relaxed. It is consistent with American guidelines such as those of the Association of American Medical Colleges, to which all Canadian medical schools belong. The major reason for weakening or deleting this provision is that it is said to present a significant obstacle to physicians in remote areas who have to travel long distances to attend CME events.

However, it is felt that the CMA should work with other interested groups to suggest alternative ways of financing CME for disadvantaged physicians.

12. In some places (but perhaps not all), pharmaceutical industry representatives keep records of the samples which they give to physicians and collect unused products. In these situations the responsibility of the physician is simply to ensure that the industry personnel are performing this task. However, physicians must keep track of which patients have received the samples, in case a problem with the drug is identified and patients to whom it has been given have to be contacted.
13. This addition is a response to comments that many physicians-in-training do not consider themselves subject to the guidelines.



November 16, 1992

Canadian
Medical
Association

Association
des médecins
du Canada

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RECEIVED NOV 20 1992

NOTICE TO RESPOND
ON
REVISION OF CMA POLICY SUMMARY
PHYSICIANS AND THE PHARMACEUTICAL INDUSTRY

From: John R. Williams, Ph.D., Director
Department of Ethics and Legal Affairs

In August, 1991 the CMA General Council approved as CMA policy a document entitled Guidelines for an Ethical Association with the Pharmaceutical Industry. The Ad-Hoc Committee which produced this document was disbanded, and ongoing responsibility for this issue was assigned to the CMA Committee on Ethics. At its meeting in October, 1991, the Committee on Ethics approved a draft Policy Summary of the Guidelines. This Policy Summary was subsequently approved by the CMA Board of Directors at its meeting on December 6-7, 1991 and published in the February 1, 1992 issue of the *CMAJ* (copy attached).

Since then, at least two provincial Colleges of Physicians and Surgeons - Ontario and Alberta - have adopted the CMA Guidelines as policy. In addition, the Pharmaceutical Manufacturers Association of Canada is concerned that the Guidelines should be consistent with its *Code of Marketing Practices*.

In response to suggestions that the time is ripe to consider revisions to the Policy Summary, the Committee on Ethics at its meeting on October 6-7, 1992 established a Working Group to coordinate the preparation of a set of amendments to the document. The target date for approval of such amendments was set for the August, 1993 meeting of General Council. In order to meet that deadline and to ensure adequate consultation with all interested groups, the Committee is proposing the following timetable for its work:

.../2

November, 1992 - write to all interested groups to request their suggestions for amendments to the Policy Summary (deadline for responses -- January 15, 1993).

January 16-30, 1993 - preparation of draft set of amendments.

February 8-9, 1993 - discussion of draft by Working Group and approval in principle by Committee on Ethics.

February 15, 1993 - circulation of draft to all interested groups for comments (deadline for responses -- April 1).

April, 1993 - revision of draft and approval by Committee on Ethics.

May 7-8, 1993 - approval by CMA Board of Directors.

May 15, 1993 - deadline for report to General Council.

August 23-25, 1993 - approval by General Council.

I realise that this schedule is tight, but if it is not possible for you to meet the January 15 deadline, you will still be able to participate in the revision process until April 1st, either by commenting on the draft set of amendments or by making general suggestions for changes.

In order to facilitate this task, the Working Group asks that suggestions for changes to the Policy Summary be in the form of specific amendments. If you feel that no changes should be made at this time, please let us know why, and whether you would favour an alternative timetable.

If you have any questions about this process, please contact me by letter, fax (613-731-9013) or phone (800-267-9703).

Thank you for your attention to this matter. I look forward to your response.

Enclosure



PHYSICIANS AND THE PHARMACEUTICAL INDUSTRY

The history of health care delivery in Canada has been marked by close collaboration between physicians and the pharmaceutical and health supply industries; this collaboration extends to research as well as to education. Since medicine is a self-governing profession physicians have a responsibility to ensure that their participation in such collaborative efforts is in keeping with their duties toward their patients and society. The following guidelines have been developed by the CMA to assist in defining the proper relationship between its members and the pharmaceutical industry. Although these guidelines focus on pharmaceutical companies the CMA believes that the same principles apply to the relationship between its members and manufacturers of medical devices, infant formulas and similar products, and health care products as well as medical service suppliers in general.

General principles

1. The primary objective of professional interactions between physicians and the pharmaceutical industry should be the advancement of the health of Canadians rather than the private good of either physicians or industry.

2. The relationship between physicians and industry must always be in keeping with the fundamental ethical principles that govern social interactions in general.

3. The relationship between physicians and industry is constrained further by CMA's Code of Ethics.

4. The interactions between physicians and industry must always respect the fundamental values of Canadian society insofar as these values do not conflict with the fundamental principles of ethics.

5. The practising physician's primary obligation is toward the patient. Relationships with industry are appropriate only if they do not affect the fiduciary nature of the physician-patient relationship. In particular, physicians should avoid any self-interest in their prescribing practices.

6. In any association between a physician who is not an employee of the pharmaceutical industry and the industry itself the physician should always maintain professional autonomy, independence and commitment to the scientific method.

Research

7. A prerequisite for physician participation in industry-sponsored research activities is evidence that these activities are ethically defensible, socially responsible and scientifically valid.

8. The participation of physicians in industry-sponsored research activities should always be preceded by formal approval of the project by an appropriate ethics review body. The project should also be subjected to an ethical evaluation by that body upon its completion. Such review should follow national guidelines of the sort promulgated by such bodies as the Medical Research Council of Canada and the National Council on Bioethics in Human Research.

Surveillance studies

9. Physicians are encouraged to participate only in surveillance studies (i.e., phase IV research studies) that are scientifically appropriate for drugs relevant to their area of practice. The degree and manner of their participation should be in keeping with generally accepted standards of ethical medical practice.

10. Physicians participating in surveillance studies should avail themselves of appropriate resources to assist them in their decision-making.

Members' comments on this subject are welcome and will be referred to the appropriate CMA councils and/or committees for consideration. Additional copies of this summary as well as further information and references are available upon request. Please address all correspondence to: President, Canadian Medical Association, PO Box 8650, Ottawa, ON K1G 0G8.

Review boards and ethics committees that already exist in their community may serve in this capacity.

11. When institutionally based review boards are unavailable, participation in research and surveillance studies should be through coordinating agencies or bodies acting as a central clearing house. These review boards, agencies and bodies should function as a resource for physicians in assessing the study's ethical acceptability and scientific value. Although these boards, agencies and bodies may be funded at arm's length by the pharmaceutical industry, they should be under the direction of the medical profession.

12. It is ethically acceptable for physicians to receive remuneration for participation in approved surveillance studies only if the participation exceeds their normal practice pattern. This remuneration should not constitute enticement. It may, however, involve opportunity costs. (Opportunity costs are the loss of otherwise available income to the physician as a result of participating in a surveillance study.) Parameters such as time expenditure and complexity of the study may also be relevant considerations. The amount of the remuneration should be approved by the relevant review board, agency or body mentioned previously.

13. Incremental costs (additional costs directly related to the surveillance study) should not be defrayed by provincial or other insurance agencies regardless of whether these costs involve diagnostic procedures or patient services. Instead, they should be assumed by the pharmaceutical manufacturer.

14. Patient participation in surveillance studies shall occur only with the full, informed and competent consent of the patient. The physician of record has an obligation to ensure that the patient is (a) fully aware that the physician's concern for the patient's welfare is not contingent on the patient's participation in the study, (b) informed of available alternatives, with their comparative advantages and disadvantages and other related matters that would be disclosed for informed consent under normal circumstances, and (c) told that he or she may withdraw from the study at any time and return to the alternative therapies indicated if that is medically feasible. If it is expected that this may not be possible the patient should be clearly informed of this at the outset. It is the physician's responsibility to ensure appropriate standards of informed consent in these matters.

The CMA believes that the guidelines proposed by the Medical Research Council of Canada on research involving humans may serve as a useful basis for structuring and obtaining the relevant consent (*Guidelines on Research Involving Human Subjects*, Medical Research Council of Canada, Ottawa, 1987).

15. The physician of record who enrolls a patient in a surveillance study has an obligation to ensure the protection of the patient's identity if the patient so wishes. If such protection cannot be guaranteed the physician should so inform the patient as part of the informed consent process.

16. It is expected that the results of any surveillance study will be made available for publication in a peer-reviewed journal within a reasonable period. Verification of this should rest with the relevant review board or agency concerned with the study.

Continuing medical education (CME)

17. The CMA clearly distinguishes between education, training (e.g., in the use of a medical device) and product promotion. CME activities should address the educational needs of the targeted medical audience.

18. The ultimate decision on the organization, content and choice of CME activities shall lie in the hands of the physician-organizers.

19. CME organizers and their delegates must not be in a position of conflict of interest by virtue of any affiliation with the company or companies that fund CME activities.

20. The ultimate decision on funding arrangements for CME activities should be the responsibility of the physician-organizers. Although the CME program may acknowledge the financial or other aid received it should not identify the products of the company or companies that fund the activities.

21. Upon conclusion of a CME activity the physician-organizers should be prepared to present a statement of account for the activity to the funding organization and other relevant parties.

22. Every effort should be made to use generic names rather than trade names in the course of CME activities. In particular, physicians should not engage in peer selling.*

*Peer selling occurs when a pharmaceutical manufacturer directly sponsors a seminar or similar event that focuses on its own products and is designed to enhance the sale of those products. The manufacturer directly engages a physician to conduct the session; this form of participation would reasonably be seen as being in contravention of the CMA's Code of Ethics, which prohibits endorsement of a specific product. Peer selling, as understood in this sense, differs from the sort of situation in which a pharmaceutical manufacturer provides funds to CME organizers to sponsor a bona fide educational event on a specific condition or on specific products. In the latter case the control and structure of the CME event lies in the hands of the CME organizers. Even though the products may be the focus of such a bona fide event the arms-length nature of the sponsorship by the manufacturer and the fact that the control and structure of the event lie in the hands of the CME organizers remove it from the realm of advertising and do not constitute an endorsement of the products in question.

23. Negotiations for space or for types of promotional displays at CME functions should not be influenced by industry sponsorship of the activity.

24. Travel and accommodation arrangements, social events and venues for industry-sponsored CME activities should be in keeping with the arrangements that would normally be made without industry sponsorship. For example, the industry sponsor should not pay for travel or lodging costs or for other personal expenses of physicians attending a CME event. Subsidies for hospitality should not be accepted outside of modest meals or social events that are held as part of a conference or meeting. However, faculty at CME events may accept reasonable honoraria and reimbursement for travel, lodging and meal expenses. Scholarships or other special funds to permit medical students, residents and fellows to attend CME events are permissible as long as the selection of participants for these funds is made by their academic institution.

Clinical evaluation packages (samples)

25. Samples should be distributed solely for the purpose of allowing physicians to evaluate the clinical performance of the medicaments outside of the context of post-marketing surveillance studies, to initiate therapy, or for a similar purpose. Any departure from this use must be justifiable in terms of otherwise applicable principles of ethical medical practice (such as justice in the provision of medical care to disadvantaged people).

26. The distribution of samples should not involve any form of material gain for the physician or for the practice with which he or she is associated.

27. Physicians who accept samples and similar devices are responsible for keeping records of their receipt, storage and distribution.

28. Physicians who accept samples and similar devices are responsible for ensuring their age-related

quality and security. They are also responsible for the proper disposal of unused samples.

Other considerations

29. For the purposes of these guidelines manufacturers of medical devices, infant formulas and similar products, and health care products as well as medical service suppliers should be considered in the same light as pharmaceutical manufacturers.

30. Physicians should not dispense pharmaceuticals or provide diagnostic or other services for material gain unless they can demonstrate that these cannot be provided within a reasonable distance by an appropriate other party.

31. Physicians should not invest in pharmaceutical companies or related undertakings if knowledge about the success of the company or undertaking might inappropriately affect the manner of their practice or their prescribing behaviour.

32. Practising physicians should not be affiliated with pharmaceutical companies if the nature of their affiliation influences their medical practice inappropriately.

33. Practising physicians should not accept a fee or equivalent consideration from pharmaceutical manufacturers or distributors in exchange for seeing them in a promotional or similar capacity.

34. Practising physicians should not accept personal gifts from the pharmaceutical industry or similar bodies.

35. Practising physicians may accept patient-teaching aids appropriate to their area of practice provided these aids carry only the logo of the donor company and do not refer to specific therapeutic agents.

Medical students, interns and residents

36. Medical curricula should include formal training that is based on these guidelines. ■

APPENDIX II

SUMMARY OF RESPONSES

University of British Columbia

May be worth pursuing; but need further clarification. Would like to receive the final report.

Newfoundland Dental Board

Agree with having appropriate national guidelines. They have no specific provincial guidelines or regulations but would adhere to CDA policy and guidelines.

Alberta Dental Association

Agrees in principle with proposed national guidelines. CDA should pursue; but ADA should have a final decision on these guidelines. They have no specific guidelines or regulations on this topic.

Nova Scotia Dental Association

Agree that some aspects are appropriate for dentistry, but feels the Ethics Committee should look at policy documents to see where this topic fits in current Code to see if a few general statements as Code amendments would suffice.

Provincial Dental Board of Nova Scotia

Still awaiting input from their Board. Not aware of any guidelines or regulations on this topic.

Agrees that CMA Policy Statement be used to serve as a framework for a CDA Guideline. Considers this a worthwhile project for the Committee on Ethics.

University of Toronto

Would like info before proceeding further with developing a policy, for instance, if there has been any ethical problems in regard to relations between dentists and the pharmaceutical industry and/or manufacturers.

Manitoba Dental Association

They have no guidelines or regulations in this area.

Would appreciate being keep informed on CDA's progress in this area.

Dental Association of P.E.I.

Agrees that Committee on Ethics should undertake development work. Looks forward to receiving our work on this matter.

Canadian Forces Dental Services

They don't deal with the dental industry nor the pharmaceutical companies. Feels no need to have a policy or participate in the development of this policy.

New Brunswick Dental Society

Feels that the individual dentist is perhaps not affected given the small numbers of samples and the like distributed to practitioners. Also, that CDA should re-examine since it is the national association who offers its gold and silver seal on products and receives payments from commercial enterprises through the Committee on Dental Devices.

They have no guidelines or regulations on this topic.

Manitoba Dental Association

Feels it would be appropriate to have national guidelines for ethical decision making and behaviour by dentists to their responsibilities to patients, the profession and the public.

They have no guidelines or regulations on this topic.

GOVERNMENT RELATIONS COMMITTEE

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Bryun Sigfstead, Chairman, Edmonton
Dr. Elizabeth MacSween, Ottawa

Senior Staff: Mr. Jardine Neilson, Executive Director
Mrs. Sandra Davis, Manager, Executive Services

1. Committee Meetings and Activities

The Committee has not met since its report to the 1993 Interim Meeting of the Board of Governors. The matters contained in this report have come to the Committee's attention through concerns of a Corporate Member, an individual member, an allied health organization or through documentation indicating legislative or regulatory changes which have potential to effect the profession.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

2. Lobbyists' Registration Act

The CDA has presented comments and concerns to the Standing Committee on Consumer and Corporate Affairs regarding the review of the Lobbyists' Registration Act and the government's review of how the cost of the Lobby Registry might be recovered through registration fees.

The CDA supports the purposes of the Lobbyists' Registration Act, assented to in September of 1988, which affirms lobbying public office holders as a legitimate activity and acknowledges the benefits of public access to a registry of those attempting to influence government. In compliance with the Act, the CDA has registered appropriate individuals as Tier II Lobbyists.

The preamble to the Act states "whereas free and open access to government is an important matter of public interest;" and "whereas a system for the registration of paid lobbyists should not impede free and open access to government". CDA stated its concern with proposals contained in Bill C-76, which, through amendment to Section 12 of the Lobbyists' Registration Act, would enable the Minister of Consumer & Corporate Affairs Canada to charge lobbyists a fee to register. CDA believes that a potential financial impediment to communication between CDA and

government would be counter to the best interests of the publics served by both. CDA's position is that non-profit organizations, especially those concerned with public health and safety, be exempt from fees in registering as Tier II Lobbyists.

The CDA works in partnership with the Federal Government on behalf of the profession and the public. A recent example of this was the 1991 CDA Conference on the Impact of HIV and Other Infectious Agents in Oral Health Care, jointly funded by CDA and Health and Welfare's Federal Centre for AIDS. The Conference allowed for a careful and comprehensive review of all CDA policies and guidelines concerning infection control, and resulted in amendments and recommendations to further protect the public and the profession. It met the joint need for government and the CDA to act in light of public concern and professional responsibility.

CDA believes that impediments to communication with government, financial or otherwise, would have a detrimental effect, not only on the Association's members and the profession of dentistry, but on the oral health of Canadians as well.

3. Tobacco Products Control Regulations

CDA continues to participate, through a health coalition, in efforts to reduce tobacco use. Most recently CDA President Dr. Bernard Dolansky, wrote in support of a submission put forth by the Canadian Council on Smoking and Health to strengthen the latest amendments to the Tobacco Products Control Regulations and to provide for their enforcement. Dr. Dolansky also expressed concern with potential delays in the new regulations which call for prominent and urgent health warnings on tobacco packaging.

4. Akwesasne Reserve

The Ontario Dental Association requested CDA to investigate circumstances surrounding a dental clinic being built on an Indian Reservation located in Akwesasne near Cornwall. The reserve is located in the province of Quebec. The ODA requested clarification of licensing requirements for the provision of dental treatment on this reserve.

Medical Services Branch has confirmed a shift in the Federal Policy related to licensure in the province of work. That is, in order to work or provide services on Federal jurisdiction, the health care provider must be licensed to practice in the province where the services are to be provided, in this case Quebec.

5. **Bill C-88 Amendment to the Copyright Act**

CDA as notified by the ODA that provisions of Bill C-88, to amend the Copyright Act, may have an impact on the dental profession by requiring a dental office that plays music from the radio or a CD player to pay a music royalty.

CDA contacted the Canadian Restaurant and Food Services Association (CRFA) for consultation and further background information. CRFA confirmed that the Minister of Communications announced amendments to Bill C-88, that in effect removed the proposed application of a tariff to restaurants, retailers and professionals such as physicians and dentists. It has been established that should this item once again become part of government's agenda, a joint lobbying initiative might be beneficial.

6. **Organizational Change - Department of National Health and Welfare**

CDA has been notified of an organizational change within Health and Welfare Canada. Effective March 1, 1993, the Health Services and Promotion Branch (HSPB) and the Social Services Program Branch (SSPB) became a single branch responsible for health and social services. Mr. Ian Green, previously the Assistant Deputy Minister in SSPB, has assumed responsibility for this new branch. The organizational change was made in an attempt to encourage linkages between health and social services.

7. **Removal of Employer Verification - Public Service Dental Claims**

Effective June 1, 1993, dental claims for federal government employees (excluding national defence reserves) can be processed through CDAnet. Up to this date, the requirement for employer verification excluded this extremely significant volume of claims from CDAnet processing.

CDA became aware of the impediment to processing of federal government employee dental claims shortly after the inception of CDAnet. To influence change to the policy of employer verification, the Executive Director initiated discussions with Treasury Board officials which resulted in a referral to the Public Service Dental Boards, the decision-making bodies for required policy changes.

Communication with individual members of the Dental Boards focused on the benefits to employees, the "no cost" feature to government of the benefit, and the lack of a significant disadvantage to removing employer verification. Mr. Peter Foley of Great West Life Assurance Company, administrators for federal government dental plans, made a significant contribution in having this matter formally addressed. Efforts culminated with the Public Service Dental Boards' pronouncement that they "were not opposed" to the removal of employer certification.

Respectfully submitted,

Bryun Sigfstead, D.D.S.
Chairman, Government Relations
Committee

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Government Relations Committee as information.

MANAGEMENT COMMITTEE

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Bernard Dolansky, Ottawa - Chairman
Dr. Bryun Sigfstead, Edmonton
Dr. Raymond Wenn, Charlottetown
Mr. Jardine Neilson, Executive Director

Senior Staff: Mrs. Sandra Davis, Manager - Executive Services

Coordinator: Mrs. Suzanne Burton

1. **Committee Meetings**

Since the 1993 Interim Meeting of the CDA Board of Governors, the Management Committee has met twice - April 30 and June 17, 1993. In addition, Management Committee met with the Management Committee of CDSPI on May 14, 1993.

ITEMS REQUIRING BOARD ACTION

2. **Audited Financial Statements - Canadian Dental Association**

The audited financial statements for the CDA were reviewed by Management Committee. Statements are appended and explanatory notes are included for information. The audited financial statements include, for comparison purposes, the revised 1992 budget figures which were presented to Governors at the 1992 Annual Meeting. The appended documentation highlights and reviews changes in approved programming as they relate to the preliminary 1992 budget approved by Governors in 1991.

APPENDIX I

RESOLVED:

93.49 **THAT the audited financial statements for the Canadian Dental Association for the year ending December 31, 1992, be approved.**

ADOPTED

3. **Audited Financial Statements - Canadian Dental Research Foundation**

Management Committee reviewed the audited financial statements for the Canadian Dental Research Foundation.

RESOLVED:

- 93.50 **THAT the audited financial statements for the Canadian Dental Research Foundation for the year ending December 31, 1992, be approved.**

ADOPTED

4. **Guidelines on Fees for CDA Services Provided or Supported through CDA Councils/Committees**

Over the past several years, the strategic planning process has identified and confirmed a need for CDA's revenue base to include an appropriate level of non-dues revenue. The general policy on budget expenditures and related cost recovery or revenue generation for Board approved activities is the responsibility of the Board. Increases to approved budgets must be submitted to Management Committee for consideration. CDA Councils/Committees as well play a role in reviewing fees and fee increases for programs and services. Management Committee has developed guidelines that clearly identify the roles and responsibilities of key elements within the CDA structure that play a role in the development of fees for CDA services, provided or supported through CDA Councils/Committees.

RESOLVED:

- 93.51 **THAT the appended Guidelines on Fees for CDA Services provided or supported through CDA Councils/Committees be approved.**

APPENDIX II

ADOPTED

5. Dental Specialties' Representative - Commission on Dental Accreditation of Canada

The current terms of reference for the Commission on Dental Accreditation of Canada stipulate that one person is appointed to the Commission by the CDA Dental Specialties Committee. This Committee was disbanded by resolution of the Board of Governors at the 1993 Interim Meeting and replaced by a meeting between CDA Management Committee and Presidents of Specialty Sections or their designate. Future appointments of the Dental Specialties' representative to the Commission will be made by CDA in consultation with Presidents of Specialty Sections.

RESOLVED:

- 93.52 **THAT the terms of reference of the Commission on Dental Accreditation of Canada with regard to specialty representation be amended to indicate that one person will be appointed by the CDA in consultation with Presidents of Dental Specialty Sections.**

ADOPTED

RESOLVED:

- 93.53 **THAT the Council on Constitution and By-Laws be directed to make the necessary By-Law amendment.**

ADOPTED

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

6. 1993 Financial Statements to April 30, 1993

CDA financial statements for the period ending April 30, 1993 were reviewed by Management Committee. Revenue from active and affiliate membership fees was approximately \$85,000 below budget. In the active fee category this is, to a large degree, due to the fact that all payments from the mandatory provinces had not been received by April 30. It is predicted that with receipt of these payments, and additional payments from other mandatory provinces which are received during the year, the total budget for active fees will be achieved. The affiliate fee category was some \$30,000 below budget.

Revenue from other sources, including Consumer Products Recognition, DAT programs and the Journal, is showing a strong positive variance. Although it is difficult to make year-end projections, Management believes that total revenue should achieve budget, with any short-fall in fee income being made up by income from other sources.

Expenses in most areas were within budget.

7. **1994 Budget Review**

The 1994 provisional budget presented to Governors at the 1993 Interim Meeting was reviewed by Management Committee. No adjustments were made pending a further review at the 1993 Planning Session.

8. **Licensing Body Fee - 1994**

In preparation for the recommendation presented to Governors at the 1993 Interim Meeting, requiring consultation with the Licensing Bodies to achieve an increase in fees paid to CDA, documentation was forwarded to each Licensing Body providing background to the request. Positive responses have been received from several provinces. Management is sensitive to the fact that the Licensing Bodies must be provided with resources specific to meet the needs of the decision-making process of their respective Boards. Follow-up communication has been initiated to ensure that all information needs have been met.

Decision-making bodies of the licensing authorities across Canada comprise lay representatives, and may also comprise CDA non-member dentists. These individuals are outside of the information flow from the CDA and thus their awareness of CDA activities and the CDA role as the national voice of dentistry, educator and protector of the public, promoter and provider of optimal oral health care may suffer. Management agreed that all such individuals should receive future mailings of relevant communications from CDA, including the Journal, Communiqué and President's letters. An appropriate package of orientation materials will be forwarded immediately.

9. **CDAnet**
- Costs to December 31, 1992

CDA financial statements to December 31, 1992 indicate a deficit balance in the CDAnet fund of \$860,891. Of this sum, \$736,444 was incurred to December 31, 1991. CDA continues to discuss with participating Corporate Members the recovery of costs incurred since the inception of CDAnet.

Management reviewed the 1992 overhead costs attributed to CDAnet, which amounted to \$102,133. This amount will not be charged back to the provinces, regardless of the fact that contract stipulations would allow its recovery. Overhead costs for 1993 will be charged back so they may be recovered. Communication on this item will be forwarded to all concerned prior to the 1993 Annual Board Meeting.

- Royalty Payments

Initial discussions have taken place between CDA representatives, Dr. Bernard Dolansky and Mr. Jardine Neilson and ACE/NDC and InterAssure/SHNS concerning the renewal of contracts and the payment of royalties to CDA. Initial discussions were encouraging and a full report and further strategies for negotiation will be discussed with the CDAnet Committee.

Staff have identified continuing difficulty in obtaining timely data extract required to verify royalty payments. CDA will request a further breakdown of royalty cheques received to assist in verification.

10. CDA Annual Dental Meetings/Convention Reserve Fund

The Convention Reserve Fund was established to provide resources to the Association to provide on an ongoing basis, a superior continuing education resource to the dental profession. The 1992 audited statements indicate a surplus in the Convention Reserve Fund of \$252,676. This is an increase of some \$60,000 over the December 31, 1991 figure, which is attributable to a most successful 1992 Calgary Convention. CDA wishes to once again extend its particular appreciation to the Alberta Dental Association and all those involved with the local organizing committee.

Preliminary figures on the 1993 Annual Dental Meeting held in Toronto are encouraging. Although all expenditures have not been processed, a surplus is anticipated. CDA wishes to thank the Ontario Dental Association for its assistance with this event, and to make special mention of the generous grant of \$25,000 towards the dinner held for CDA and ODA dignitaries on the eve of the Meeting.

11. 1994 Per Diem/Honoraria Rates

On recommendation of the Management Committee, the Executive Council has approved the appended increase to the 1994 per diem and honoraria rates which reflects a 3% increase over the 1993 rates.

APPENDIX III

12. **Annual Grant to CFDE**

The Executive Council has approved a recommendation of the Management Committee to maintain the CDA annual grant to CFDE at \$20,000 for 1994. The recommendation approved by the Executive Council referred to the payment of the annual grant to CFDE through the proposed new Canada Dentistry Fund.

13. **Amalgamation of Fund Administration - CDA Charities**

At the 1993 Interim Meeting, Governors were informed that Management Committee had approved in principle a concept for amalgamation of fund administration for CDA charities involving a new identity for the umbrella organization - Dentistry Canada Fund.

Management's approval was subject to specific provisions which have been addressed in a document outlining the merger of charitable entities within CDA. Further information and recommendation is contained in the Executive Council report.

14. **CDA Awards/Dentsply Student Clinicians' Luncheon**

Dentsply has accepted CDA's invitation to participate in and support the CDA Awards/Dentsply Student Clinicians' Luncheon which will be held on Friday, September 10 in conjunction with the Annual Meeting.

Table clinics and judging will be held on Friday, September 10 followed by the Awards/Dentsply Student Clinicians' Luncheon, where the winners will be announced. The open forum for clinics will be held from 11:00 a.m. to 12:30 p.m. on Saturday, September 11. Governors and all others in attendance at the Annual Meeting are urged to take this opportunity to view the clinics, and offer personal congratulations to participants. Dentsply International has graciously provided a grant in the amount of \$5,000 to help defray the costs of the Luncheon.

15. **Grieve Memorial Lecture Agreement**

The Canadian Association of Orthodontists (CAO) and the CDA are reviewing current administrative arrangements between the two organizations with regard to the Grieve Memorial Lecture. The intent is to formalize an agreement in this area. The original draft agreement, developed over a year ago by representatives

of both organizations, was reviewed by the CAO Board of Directors and Executive at a recent Interim Meeting and significant changes have now been proposed.

The extent of the CAO proposal is such that it would require an amendment to the original Deed of Trust for the Grieve Memorial Lectureship. It also involves stipulations concerning the theme of the CDA Annual Dental Meeting which are unacceptable to CDA.

CDA has no desire to extend or accelerate discussion or potential disagreement with the CAO on this issue. CDA's response indicates that if the CAO is firm in its proposal, it may wish to explore the legalities of disbanding the Deed of Trust and re-directing the Fund revenue.

16. **FDI World Dental Congress - Vancouver**

The Council of the College of Dental Surgeons of B.C. has approved the payment of \$90,000 to CDA to register B.C. dentists for World Dental Congress 1994 in Vancouver. All dentists licensed with the College at the time of the Congress will have the \$95 Canadian general registration fee waived provided they pre-register before the cut-off date. CDA has extended its thanks and appreciation to the College for its support in seeing to the approval of this agreement in an expeditious manner.

17. **Out-of-Province Health Care Coverage**

Executive Council has approved a recommendation from the Management Committee to amend CDA's current travel and accident insurance coverage with Seaboard Life to include out-of-province hospital/medical coverage for individuals travelling on CDA business.

18. **CDA/CDSPI Management Meeting**

The May 14 meeting between CDA and CDSPI Management Committees was devoted in part to discussion of matters related to CDA's Application before the Ontario Court General Division and the Appeal of Justice McKeown's decision. Further information on this item is included in the Executive Council report.

The following matters were also reviewed:

- CDA Expense - CDIP/CDA RSP

As identified to Governors at the 1993 Interim Meeting, Executive Council must continue to play an active role in decision taking elements of the administration of CDIP and the CDA RSP. This has an impact on CDA resources, both human and financial. CDA has submitted an initial proposal to CDSPI identifying extraordinary costs which have been incurred in recent years and requested that reimbursement be considered. At the May 14 meeting, it was agreed that CDA would identify a concept on how specific costs would be approached on an annual basis, identifying separately those that relate to Trust items and those that are administrative in nature. Discussion of this item is ongoing between the Managements of both organizations.

- CDAA Request - Eligibility CDIP

CDSPI forwarded to CDA a request received from the Canadian Dental Assistants' Association (CDAA), asking that CDA consider waiving CDIP eligibility requirements for dental assistants who are members of the CDAA. Current eligibility requirements involve working for a dentist who is a member of the CDA or a participating corporate member. CDSPI has been informed that this eligibility requirement is to remain unchanged.

19. CDA RSP Financial Statements

The CDA RSP financial statements to May 31, 1993 were not available for review by Management Committee or Executive Council. Receipt of these statements is anticipated prior to the 1993 Annual Meeting, and approval will be required in order that the statements can be published as the CDA RSP Annual Report. As previously outlined to Governors, Management will approve the statements on behalf of the Executive Council. They will be presented for the Governors' information at the 1994 Interim Meeting.

20. CDA Representatives - Committees of the Commission on Dental Accreditation of Canada

In consultation with the Committee on Nominations, Awards and Trusts, Management has approved the re-appointment of Drs. John Diggins and John Hardie for a second three-year term on the Allied Dental Education Committee and the Health Facilities Committee of the Committee on Dental Accreditation of Canada respectively. The re-appointments are effective in September, 1993 when the first three-year term of these individuals expires.

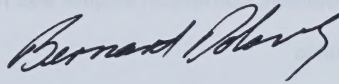
21. **Memorial Donations**

Management Committee has approved memorial donation on behalf of the late Dr. Donald E. Williams, CDA Past-President and Mrs. Olive Utas, wife of CDA Past-President Dr. Gilbert Utas. Donations were made in the name of the officers and members of the CDA.

22. **Cheque Registers - Chairman's Audit**

The Executive Director of the Association reviews monthly cheque registers detailing disbursements of the CDA. The President-Elect conducts audits of CDA disbursements on a random basis from time to time. Cheque registers to May 31, 1993 have been reviewed and a report provided to Management Committee.

Respectfully submitted,



Bernard Dolansky, B.A., D.D.S., M.S.
Chairman, Management Committee

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Management Committee.

SUPPLEMENTARY NOTES TO THE 1992 AUDITED FINANCIAL STATEMENTS

These notes were prepared by staff and explain financial activity that may not be evident from the figures alone.

BALANCE SHEET (page 2 of the Audited Financial Statements)**ASSETS**Current Assets**Cash**

In 1992, the line of credit was converted to a conventional mortgage. This partially accounts for the large change in cash held compared to 1991. Another reason is the timing of the convention; convention income was received earlier than normal.

Accounts Receivable

Receivables, generated from three principal areas: journal advertising, library services and general accounts, were up significantly over 1991. However, the majority of receivables were less than 30 days old. Of the total, \$97,000 represented the grant receivable from the Canadian Dental Foundation.

Inventory

Inventory figures, made up of Dental Awareness Program merchandise were consistent with the previous year.

Pre-Paid Expenses

Pre-paid expenses appear to be substantially higher than the previous year. However, the timing of the convention is again a factor. Approximately \$107,000 represents expenses paid in advance for the 1993 annual dental meeting and appropriately \$119,000 represents prepaid expenses for the 1994 FDI Congress. Examples of prepaid expenses for the convention would be deposits for such things as the convention center and work done in 1992, and paid for, that is attributable to future meetings. The amount related to general CDA operations consists of pre-paid postage, funds set aside for the defined benefit pension plan for the Executive Director and contracts paid in 1992 which provide coverage or use in 1993, such as insurance premiums and equipment leases.

Fixed Assets

The decrease in the book value of fixed assets is a result of depreciation. A detailed breakdown of the fixed assets is included as part of the "formal" notes to financial statements. (see page 7 of the Audited Financial Statements)

TRUST ASSETS

Trust assets are the combined assets of the two funds held in trust by CDA, the Sydney Wood Bradley Memorial Trust Fund and the Grieve Memorial Lectureship Fund.

Cash

The increase in cash held was primarily due to donations which were higher in 1992.

Pre-Paid Expenses

This amount represents pre-paid subscriptions ordered by the library.

LIABILITIES

Current Liabilities

Bank Overdraft

As noted above, CDA utilized a line of credit for its borrowing needs in 1991. In 1992 CDA moved to a fixed commercial mortgage in the amount of \$1,500,000 (see below).

Accounts Payable

Accounts payable at year end were down substantially from the year before. The figure includes \$44,000 in payables related to the convention which again due to the timing of the 1993 annual dental meeting, was higher than normal. These amounts represent invoices received in December and due in 1993.

Deferred Revenue

The deferred revenue largely represents 1993 membership fee income received in 1992. The amount is higher in 1992, compared to 1991, due to the earlier start of the 1992 membership campaign. The deferred income figure also includes DAT income received in 1992 for the 1993 spring test.

Current Portion of Long Term Debt

This amount reflects that portion of the mortgage principal payable within one year of the statement and is separated out according to accounting principles.

Long Term Debt

This is the principal amount outstanding on the mortgage at the end of 1992. The \$44,144 difference represents that portion of principal paid in 1992 and the amount shown in current liabilities as the current portion.

EQUITY

Surplus

The Surplus, which may be referred to as Members' Equity or the Accumulated Surplus, is detailed in the Statement of Equity. (see page 3 of the Audited Financial Statements) More information on the CDA Reserve Funds is also detailed in the Statement of Equity.

TRUST EQUITY

The trust equity, equivalent in total to the trust assets, shows the members equity in these two accounts. Revenue and expenditure information for the two trust funds is detailed in the statements. (see pages 5-6 of the Audited Financial Statements)

STATEMENT OF EQUITY (page 3 of the Audited Financial Statements)

This statement provides a further breakdown of information contained on the balance sheet. The convention fund and the CDAnet fund are internally segregated accounts set up by the Association.

Surplus

The general surplus of the organization increased by \$200,662, the amount of the surplus in 1992.

Convention Reserve Fund

In 1988, CDA set up a Convention Reserve Fund reserve fund to help fund future Conventions. In 1992, an operating surplus of \$61,086 in the convention department increased the amount in reserve. In 1991 there was a deficit.

CDAnet Fund

With contractual agreements between CDA and participating provinces in place, CDA set up a fund in 1990 to track revenue and expenditures related to the CDAnet electronic data interchange project. Costs to date have amounted to \$838,469 and, although some

income has been recovered, the fund currently sits in a deficit position. It is CDA's intention to recover its total investment in this program.

STATEMENT OF REVENUE AND EXPENSES (page 4 of the Audited Financial Statements)

This statement summarizes the financial activity of the Association during the year. More detail is provided further on in the financial statements and supplementary notes. The bottom line shows a surplus of \$200,662, \$286,460 more than budgeted.

STATEMENT OF REVENUE AND EXPENSES AND EQUITY LIBRARY TRUST FUND (page 5 of the Audited Financial Statements)

The Library Trust Fund, under its terms, provides funding principally for the purchase of texts and periodicals for the CDA Library. With the grant awarded by the Canadian Dental Foundation toward the operating costs of the Library, a majority of costs are covered in this manner. The Library Trust Fund, however, has been maintained and a portion of the CDF grant was transferred into this fund.

STATEMENT OF REVENUE AND EXPENSES AND EQUITY GRIEVE MEMORIAL LECTURESHIP FUND (page 6 of the Audited Financial Statements)

The Grieve Memorial Lectureship Fund is used to sponsor a lecture, offered at the time of the CDA Annual Dental Meeting on the topic of orthodontics. The donation in 1992 was from the Canadian Association of Orthodontists. This organization is working with CDA to review the fund to ensure it continues to achieve its mandate. Expenses in 1992 were related to an honoraria payment, travel expenses and for an appropriate plaque.

NOTES TO THE FINANCIAL STATEMENTS (pages 7 & 8 of the Audited Financial Statements)

The formal "Notes to the Financial Statements" are provided by the auditors to explain the methodology used in preparing the financial statements and to outline any significant accounting policies.

With regard to note 5, it should be noted that Management believes that because CDA is a non-profit organization providing membership services that are for the most part consistent and, further, that the majority of CDA revenue comes from annual membership fees which are used within the year to provide these services, the statement of changes in financial position is not a particularly useful management tool.

SCHEDULE OF REVENUE (page 9 of the Audited Financial Statements)

The schedule of revenue, and the subsequent schedule of expense, provides details not shown in the statement of revenue and expense on page 4 of the Audited Financial Statements. The totals, however, are the same.

FEES

Active Fees

Revenue derived from Active fees was up from 1991 primarily as a result of the increase in the membership fee which rose from to \$365 to \$395. The number of active members actually declined by 623. This however, must be read in conjunction with the note on affiliate fees where there was an increase in members. (For further information on the breakdown of membership fee income, see the schedule on page 12 of the Audited Financial Statements)

Affiliate Fees

Affiliate fee income was up significantly from the previous year, representing an increase of 431 in the number of affiliate members, coupled with the fee increase.

Supporting Fees

Supporting fee income was slightly below budget but consistent with last year. There was a drop of 4 members.

Student Fees

Student fee income was down from 1991 actual figures and down considerably from budget. The decrease is principally a matter of timing as there was no significant change in the number of student members. The problem of timing is associated with the academic year and the voluntary nature of student fees. The fees for the academic year are sometimes not remitted until the new calendar year and because they are not mandatory they cannot be set up as a receivable. Hence, in any given calendar year, you can have an unusually high or low number. The student membership fee is set at a rate of 6% of the active fee and the 1992/93 fee was \$25.

Retired Fees

There was a modest decline in this category.

Corporate Fees

Corporate fees were down slightly from budget, but up from the year before due to the increase from \$10 to \$12.

Licensing Body Grants

There was modest growth in the number of licensed dentists and hence in the Licensing Body Grants.

F.D.I.

Down from the year before, FDI income represents the difference between fees collected from dentists in Canada and the amount remitted to FDI. The difference is used to offset expenses incurred in FDI membership promotion, administration and foreign exchange.

OTHER

Accreditation Surveys

This item includes income from college surveys, income collected by the ACFD towards university surveys, hospital surveys and a contribution by the National Dental Examining Board. Hospital survey income was up from 1991, based on the number of surveys. As well, the grant from the NDEB was increased from \$18,000 in 1991 to \$36,000 in 1992.

Consumer Product Recognition

This item represents income from the seal of recognition program which in addition to toothpaste in 1992, included surgical gloves. Revenue, however, was down from previous years, as a result of a couple of companies withdrawing their products from the program.

Dental Aptitude Test

This item represents fees charged for the DAT exam as well as income from the sale of additional test supplies. The number of applicants writing the test was up marginally from the previous year.

Merchandise

This revenue is generated from a number of sources including pamphlet sales, DHM material sales and other merchandise offered for sale by CDA. Sales of the new patient information system exceeded expectations and this boosted total revenue.

Library

Library income includes a grant from the Canadian Dental Foundation towards the operating expenses of the Library. In 1992, the total grant to CDA amounted to \$217,000. Of this, \$75,000 was a special one time grant requested by CDA to bolster cashflow. It was made possible by strong capital growth of the fund. The balance of the income was generated from the sale of library services which, at approximately \$14,500, was consistent with last year. As noted above, a portion of the total CDF grant was channeled into the Sydney Wood Bradley Memorial Trust Fund.

Conferences and Seminars

This item includes grants totalling over \$19,000 received from the CFDE toward the Teaching and Student Conferences, an administrative fee charged against the convention account and a surplus generated by taxation seminars. Income was higher in 1991 because of other conferences managed by CDA that generated small surpluses (excluding overhead expenses) such as the HIV Conference. Also, the CFDE grants were lower in 1992 compared to 1991.

Journal Revenue

Journal revenue from the sale of commercial advertising again exceeded prior year amounts as performance in this area continues on an upward trend. This item also includes income from classified advertising and the sale of reprints; classified advertising with a new format and renewed emphasis on marketing this component saw revenues climb 400 per cent from 1991, three times the budgeted amount.

Property

An increase in property revenue from the rental of space in the CDA building reflected the lease of space to the Canadian Medical Association and was double the amount received in 1991.

Interest

Interest income in 1992 reflected the use of the mortgage as apposed to the line of credit in 1991, enabling CDA to invest some cash. Although interest revenue exceeded budget, low interest rates affected income.

Other Income

Other income consists of royalties received from the Affinity Card and travel programs, foreign exchange, sales tax refunds, administrative fees, and other miscellaneous sources. Royalties represent approximately one third of the total.

SCHEDULE OF EXPENSES (pages 10 & 11 of the Audited Financial Statements)

Kindly note that in those areas where there was little change in financial activity, no explanatory notes are provided. Also, readers should be aware that where possible expenses are recorded by project area. However, general overhead expenses including staff costs are recorded as an "administration expense" and are not prorated by project area.

EXECUTIVE SERVICES

Board of Governors

Board of Governors expense is below budget and below prior year expenses. Travel and per diem expense was lower than budget based on fewer committee chairmen attending. As well, printing and postage costs for resource books and transactions were lower.

Executive Council

Executive Council meeting expenses were actually close to budget and were similar to last year. The 1992 budget allowed for additional activities of Council including attendance at CDA conferences, the annual dental meeting and matters related to CDIP trusts. The level of these activities was below that which was anticipated. As well, it should be noted that the budget allowed for media training but that this was postponed.

Management Committee

This item includes the cost of regular and impromptu meetings, honoraria payments and grants and donations, including a \$20,000 grant to the CFDE.

President's Expenses

The President's expenses related to official functions were close to previous year figures. The budget had been scaled back mid-year but priorities necessitated the additional expense. The cost of the President's Installation Dinner was also charged to this account and expenses for this event were lower than last year.

Constitution and By-Laws

No comment.

FDI

This item includes the corporate fee paid to FDI (\$25,703 in 1992 compared to \$21,192 in 1991) and expenses related to promoting FDI individual membership in Canada. Costs related to the attendance of CDA delegates to the FDI congress normally included in this line item were charged to the FDI 1994 meeting account given that the majority of their time in Berlin was spent promoting FDI '94. This decision taken mid-year is why expenses are below budget and below last year's total.

Intercompany Relations

This item represents the Executive Director's travel related to corporate member activities and also includes costs related to CDA participation in the Secretaries Conference. Travel costs were modestly below budget.

Nominations

Expenses, while on budget, were lower than last year because of lower travel costs.

New Projects

This is a budget item included each year to allow Executive Council and Management some discretion should issues arise mid-year that must be dealt with.

PROFESSIONAL SERVICES

Accreditation

This item includes Commission and related committee expenses, as well as the cost of conducting surveys. Expenses related to meetings and commission activity were up \$5,000 over budget due to increased travel costs and heavy translation costs. University survey costs at \$52,491, were on budget but were much higher than last year due to the schedule of surveys. Hospital survey costs were also much higher than last year. College survey expenses were below last year.

Consumer Product Recognition

Expenses were on budget. They were higher than last year due to additional committee activity.

Dental Aptitude Test Program

Expenses include the cost of running the DAT program as well as related committee expenses. Expenses were close to previous year totals; additional funds budgeted for supplies were not expended.

Dental Materials and Devices

Travel and meeting costs were lower than expected.

Dental Specialties

Travel and meeting costs were higher than expected.

Education

This line item includes the Council on Education as well expenses related to the Teaching Conference. Expenses were below budget as a result of savings in the cost of travel and accommodation.

Ethics

There were no meeting costs but there were printing costs related to the publication of the Code of Ethics.

Community & Institutional Dentistry

Expenses were higher than last year and exceeded budget primarily due to work done in the area of hazardous waste disposal. This work was expected to be completed by 1991 but was delayed.

PRUC

Activity in this area was postponed.

MEMBER SERVICES

Government Relations

Expenses in this area, which include the Medical Services Branch Committee, are related to lobbying and other liaison activities. There was little formal meeting activity; the bulk of the expense is related to the Government Relations Dinner at which Hugh Segal was guest speaker.

Information Services

Information Services is made up of several component expenses including the Dental Awareness and Dental Health Month Programs. This area also includes the inventory expense of merchandise sold in both of these programs, the net amount of the DAP "special projects" which are corporately funded program initiatives and the meeting expenses of the Communication Steering Committee. Expenses in most of these areas were close to budget. Steering Committee expenses were well below last year as a result of one less meeting. The Special Projects area had a net expense as work was completed for projects not sponsored as at December 31, 1992. And merchandise expense was up considerably, as was revenue from sales, as a result of the success of the Patient Information System publications.

Insurance and Investments

Expenses related to CDA administration of the CDIP and CDA RSP are being tracked and charged to this account. In 1992, legal expenses related to the QDSA law suit were charged to this account as well; they amounted to \$134,299, well above the \$100,000 estimated and represent the majority of expenses in this area.

Membership

Membership promotion was again a high priority in 1992 and accordingly the budget reflected this. Actual expense was held below budget. Expenses were related to the "speaker tours", where the President or his designate attended various local society meetings to discuss CDA activities, the brochures and other publications related to membership promotion and Committee meeting costs. Expenses also included consulting fees related to the development of the membership marketing strategy although the bulk of this work was done in 1991.

Publications

This item includes expenses related to the Journal and the Communique including the annual review edition. Expenses in total were well below the previous year with printing costs for the Journal being more than \$170,000 lower than the previous year. Postage and commission sales costs were higher.

Student Affairs

This item includes Committee expenses, student membership promotion expenses and expenses related to the student conference in 1992. A new publication, the "Grad Binder" which is a collection of policy statements and programs and services, was published and used for promotional purposes.

Taxation

Taxation Committee expenses were consistent with normal activity and were below budget which allowed for consulting activity that was not necessary.

Third Party Plans

Third Party Committee expenses were on par with last year. Meeting costs were below budget.

Library

Library expenses, that is those expenses directly related to Library activities but exclusive of overhead, were lower in 1992 although activity was relatively constant.

ADMINISTRATION

Staff

Staff expense includes staff salaries, benefits, travel, training, temporary staff and other related expense items. Expenses in 1992 rose less than 3 per cent despite larger increases in UIC premiums and group insurance costs. A hiring freeze and downsizing through attrition helped to keep costs below budget.

Operations

Operations expense, which include telephone charges, office equipment, insurance, stationary and other overhead expenses, was both below budget and below the previous year expense. This line item also includes the net GST expense for the Association which amounted to \$143,832 in 1992. Savings occurred principally in the area of office furnishings and equipment where whenever possible purchases were postponed.

Property

Property expense in 1992 fell below budget due to overestimated interest costs. However, it was principally interest expense, amounting to \$112,553 in 1992 compared to \$32,333 in 1991, that pushed total expense above last year.

SCHEDULE OF MEMBERSHIP BY PROVINCE (page 12 of the Audited Financial Statements)

This section of the statements is provided for information and represents a record of membership fees received by CDA during the year. Figures are not always divisible by the current years'

fee because of previous year payments recorded in the current year, partial payments or foreign exchange.

CANADIAN DENTAL RESEARCH FOUNDATION (separate statements)

The activity in the CDRF was similar to previous years. Interest income was lower due to interest rates. The biennial CDRF award was last presented in 1991.

CANADIAN DENTAL ASSOCIATION

FINANCIAL STATEMENTS

DECEMBER 31, 1992

CANADIAN DENTAL ASSOCIATION
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DECEMBER 31, 1992

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McCAY, DUFF & COMPANY

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AUDITORS' REPORT

To the Members of
Canadian Dental Association.

We have audited the balance sheet of the Canadian Dental Association as at December 31, 1992 and the statements of revenue and expenses, equity and revenue, expenses and equity for the Library Trust Fund and The Grieve Memorial Lectureship Fund for the year then ended. These financial statements are the responsibility of the association's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects the financial position of the Association as at December 31, 1992 and the results of its operations for the year then ended in accordance with generally accepted accounting principles.

McCay, Duff & Co.

Chartered Accountants.

Ottawa, Ontario,
April 9, 1993.

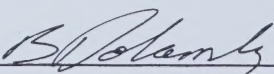
CANADIAN DENTAL ASSOCIATION

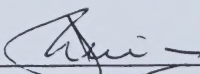
BALANCE SHEET

AS AT DECEMBER 31, 1992

	ASSETS	1992	1991
CURRENT			
Cash		\$ 851,973	\$ -
Accounts receivable		297,602	170,686
Inventory		85,439	87,216
Prepaid expenses		422,010	173,836
		<u>1,657,024</u>	<u>431,738</u>
FIXED (note 3)		<u>2,489,654</u>	<u>2,700,623</u>
		<u>4,146,678</u>	<u>3,132,361</u>
	TRUST ASSETS		
Cash		19,432	15,542
Prepaid expenses		15,446	10,528
		<u>34,878</u>	<u>26,070</u>
		<u>\$4,181,556</u>	<u>\$3,158,431</u>
	LIABILITIES		
CURRENT			
Bank overdraft		\$ -	\$ 520,430
Accounts payable		418,215	591,335
Deferred revenue		1,270,350	1,183,585
Current portion of long-term debt		27,945	-
		<u>1,716,510</u>	<u>2,295,350</u>
LONG-TERM DEBT (note 4)		<u>1,455,856</u>	<u>-</u>
		<u>3,172,366</u>	<u>2,295,350</u>
	EQUITY		
Surplus		1,582,527	1,381,865
Convention Reserve Fund		252,676	191,590
CDA net Fund (deficit)		(860,891)	(736,444)
		<u>974,312</u>	<u>837,011</u>
	TRUST EQUITY		
Library Trust Fund		15,667	11,498
The Grieve Memorial Lectureship Fund		19,211	14,572
		<u>34,878</u>	<u>26,070</u>
		<u>\$4,181,556</u>	<u>\$3,158,431</u>

Approved on behalf of the Board:


 President


 Executive Director

CANADIAN DENTAL ASSOCIATION

STATEMENT OF EQUITY

FOR THE YEAR ENDED DECEMBER 31, 1992

	<u>1992</u>	<u>1991</u>
SURPLUS		
BALANCE - BEGINNING OF YEAR	\$1,381,865	\$1,754,530
Net revenue (expenses) for the year	<u>200,662</u>	(<u>372,665</u>)
BALANCE - END OF YEAR	<u>\$1,582,527</u>	<u>\$1,381,865</u>
 CONVENTION RESERVE FUND		
BALANCE - BEGINNING OF YEAR	\$ 191,590	\$ 263,878
Convention revenue	650,828	420,084
Convention expenses	(<u>589,742</u>)	(<u>492,372</u>)
Net convention revenue (expenses) for the year	<u>61,086</u>	(<u>72,288</u>)
BALANCE - END OF YEAR	<u>\$ 252,676</u>	<u>\$ 191,590</u>
 CDAnet FUND		
BALANCE (DEFICIT) - BEGINNING OF YEAR	(\$ 736,444)	(\$ 541,877)
CDAnet revenue	22,335	-
CDAnet expenses	(<u>146,782</u>)	(<u>194,567</u>)
Net CDAnet revenue (expenses) for the year	(<u>124,447</u>)	(<u>194,567</u>)
BALANCE (DEFICIT) - END OF YEAR	<u>(\$ 860,891)</u>	<u>(\$ 736,444)</u>

CANADIAN DENTAL ASSOCIATION
STATEMENT OF REVENUE AND EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 1992

	<u>1992</u>		<u>1991</u>
	<u>Budget</u>	<u>Actual</u>	<u>Actual</u>
REVENUE			
Fees (Page 9)	\$3,995,321	\$3,906,982	\$3,697,915
Other (Page 9)	<u>1,614,100</u>	<u>1,816,791</u>	<u>1,442,511</u>
	5,609,421	5,723,773	5,140,426
EXPENSES			
Executive services (Page 10)	641,075	533,434	607,554
Professional services (Page 10)	378,149	355,245	323,307
Member Services (Page 11)	1,521,155	1,634,328	1,663,203
Administration (Page 11)	<u>3,154,840</u>	<u>3,000,104</u>	<u>2,919,027</u>
	<u>5,695,219</u>	<u>5,523,111</u>	<u>5,513,091</u>
NET REVENUE (EXPENSES) FOR THE YEAR	(\$ <u>85,798</u>)	\$ <u>200,662</u>	(\$ <u>372,665</u>)

CANADIAN DENTAL ASSOCIATION

LIBRARY TRUST FUND

STATEMENT OF REVENUE, EXPENSES AND EQUITY

FOR THE YEAR ENDED DECEMBER 31, 1992

	<u>1992</u>	<u>1991</u>
REVENUE		
Interest	\$ 60	\$ 279
Donations	<u>22,000</u>	<u>14,920</u>
	22,060	15,199
EXPENSES		
Books	5,484	7,330
Miscellaneous	391	-
Subscriptions	<u>12,016</u>	<u>11,179</u>
	<u>17,891</u>	<u>18,509</u>
NET REVENUE (EXPENSES) FOR THE YEAR	4,169	(3,310)
Equity - beginning of year	<u>11,498</u>	<u>14,808</u>
EQUITY - END OF YEAR	<u>\$15,667</u>	<u>\$11,498</u>

CANADIAN DENTAL ASSOCIATION
 THE GRIEVE MEMORIAL LECTURESHIP FUND
 STATEMENT OF REVENUE, EXPENSES AND EQUITY
 FOR THE YEAR ENDED DECEMBER 31, 1992

	<u>1992</u>	<u>1991</u>
REVENUE		
Donation	\$ 6,000	\$ -
Interest	<u>817</u>	<u>1,071</u>
	6,817	1,071
EXPENSES		
Awards	<u>2,178</u>	<u>1,564</u>
NET REVENUE (EXPENSES) FOR THE YEAR	4,639	(493)
Equity - beginning of year	<u>14,572</u>	<u>15,065</u>
EQUITY - END OF YEAR	<u>\$19,211</u>	<u>\$14,572</u>

CANADIAN DENTAL ASSOCIATION
NOTES TO FINANCIAL STATEMENTS

Page 7

DECEMBER 31, 1992

1. SIGNIFICANT ACCOUNTING POLICIES

(a) Basis of Accounting

Revenue and expenses are recorded on the accrual basis, whereby they are reflected in the accounts in the period in which they have been earned and incurred respectively, whether or not such transactions have been finally settled by the receipt or payment of money.

(b) Inventory

Inventory is stated at the lower of cost and net realizable value.

(c) Depreciation

All major fixed asset expenditures are capitalized and depreciated while minor fixed asset expenditures are expensed in the year of acquisition.

Depreciation is provided on the straight line basis as follows:

Building	- 40 years
Building improvements	- 10 years
Furniture and equipment	- 10 years
Data processing equipment	- 3 years

(d) Executive Pension Plan

The initial contribution made to the defined contribution pension plan is included in prepaid expenses and is being amortized on a straight line basis over six years.

2. CDAnet FUND

During the past four years, the Association has been developing an electronic data interchange program referred to as CDAnet. During 1990, the Association entered into contractual commitments with several provincial dental associations in connection with the distribution of income generated by the CDAnet program. A term of this agreement allows for the Association to recover its developmental and operating costs relating to CDAnet. In the event the operating costs become unrecoverable, they would be absorbed by the surplus account.

CANADIAN DENTAL ASSOCIATION
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 1992

3. FIXED ASSETS

	1992			1991
	Cost	Accumulated Depreciation	Net	Net
Land	\$ 82,915	\$ -	\$ 82,915	\$ 82,915
Building	2,500,570	789,010	1,711,560	1,783,963
Building improvements	630,503	295,303	335,200	382,341
Furniture and equipment	425,188	96,500	328,688	368,587
Data processing equipment	280,505	261,754	18,751	70,277
Chain of office	12,540	-	12,540	12,540
	<u>\$3,932,221</u>	<u>\$1,442,567</u>	<u>\$2,489,654</u>	<u>\$2,700,623</u>

4. LONG-TERM DEBT

	1992
Mortgage, payable \$14,038 monthly, including interest at 9.75%, maturing April 27, 2011, secured by land and building	\$1,483,801
Current portion	<u>27,945</u>
	<u>\$1,455,856</u>

Principal payments due in the next five years are as follows:

1993	\$27,945
1994	\$30,736
1995	\$33,805
1996	\$37,182
1997	\$40,895

5. STATEMENT OF CHANGES IN FINANCIAL POSITION

Under generally accepted accounting principles, a statement of changes in financial position forms a part of the financial statements of an organization. In the case of the Association it would not provide additional useful information and consequently management is of the opinion it need not be included.

6. CONTINGENT LIABILITY

The Association has been named in a lawsuit, together with Canadian Dental Service Plan Incorporated and members of CDA's Executive Council in an action brought forward by the Quebec Dental Surgeons Association in regard to the use of surplus funds in the Canadian Dental Insurance Plan. The outcome of the matter is not readily determinable. As of December 31, 1992, approximately \$219,000 had been expended for legal representation.

CANADIAN DENTAL ASSOCIATION

Page 9

SCHEDULE OF REVENUE

FOR THE YEAR ENDED DECEMBER 31, 1992

	<u>1992</u>		<u>1991</u>
	<u>Budget</u>	<u>Actual</u>	<u>Actual</u>
FEES			
Active	\$3,352,365	\$3,105,704	\$3,097,077
Affiliate	151,285	322,123	140,373
Supporting	13,430	11,949	11,847
Student	51,238	40,320	45,833
Retired	10,665	9,965	10,410
Corporate	131,148	128,382	108,305
Licensing body	280,190	286,670	280,190
F.D.I.	<u>5,000</u>	<u>1,869</u>	<u>3,880</u>
	<u>\$3,995,321</u>	<u>\$3,906,982</u>	<u>\$3,697,915</u>
OTHER			
Accreditation surveys	\$ 79,600	\$ 89,710	\$ 70,600
Consumer product recognition	40,000	38,009	45,000
D.A.T.	300,000	301,223	277,755
D.A.P. Merchandise	200,000	269,469	131,418
Library	193,500	207,293	143,487
Conferences and seminars	55,000	56,507	63,918
Journal	640,000	715,050	604,413
Property	25,000	63,265	30,127
Interest	30,000	27,105	15,969
Other	<u>51,000</u>	<u>49,160</u>	<u>59,824</u>
	<u>\$1,614,100</u>	<u>\$1,816,791</u>	<u>\$1,442,511</u>

CANADIAN DENTAL ASSOCIATION

SCHEDULE OF EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 1992

	1992		1991
	<u>Budget</u>	<u>Actual</u>	<u>Actual</u>
EXECUTIVE SERVICES			
Board of Governors	\$148,947	\$133,797	\$141,474
Executive Council	106,307	89,666	108,227
Management Committee	170,643	170,768	166,382
President's expenses	72,600	77,312	79,051
Constitution and by-laws	1,878	1,198	1,315
F.D.I.	53,250	25,851	64,594
Intercorporate relations	22,400	20,701	26,954
Nominations	15,050	14,141	19,557
New projects	<u>50,000</u>	<u>-</u>	<u>-</u>
	<u>\$641,075</u>	<u>\$533,434</u>	<u>\$607,554</u>
PROFESSIONAL SERVICES			
Accreditation	\$132,500	\$143,186	\$ 92,566
Consumer product recognition	12,500	12,408	9,904
D.A.T.	150,225	137,088	140,438
Dental materials and devices	8,700	6,841	8,458
Dental specialties	7,500	8,516	6,631
Education	32,500	16,809	27,465
Ethics	7,344	4,258	5,595
Community and institutional dentistry	14,380	26,139	20,169
Professional resource utilization	<u>12,500</u>	<u>-</u>	<u>12,081</u>
	<u>\$378,149</u>	<u>\$355,245</u>	<u>\$323,307</u>

CANADIAN DENTAL ASSOCIATION

SCHEDULE OF EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 1992

	<u>1992</u>		<u>1991</u>
	<u>Budget</u>	<u>Actual</u>	<u>Actual</u>
MEMBER SERVICES			
Government relations	\$ 10,000	\$ 5,727	\$ 7,309
Information services	291,360	407,054	323,848
Insurance and investments	103,000	145,122	72,128
Membership	160,000	138,103	187,820
Publications	774,050	772,003	909,200
Student affairs	91,895	99,313	86,783
Taxation	10,000	3,532	3,635
Third party	37,000	21,671	24,295
Library	43,850	41,803	48,185
	<u>\$1,521,155</u>	<u>\$1,634,328</u>	<u>\$1,663,203</u>
ADMINISTRATION			
Staff	\$2,036,820	\$1,943,763	\$1,969,440
Operations	551,200	519,625	537,851
Property	566,820	536,716	411,736
	<u>\$3,154,840</u>	<u>\$3,000,104</u>	<u>\$2,919,027</u>

CANADIAN DENTAL ASSOCIATION

SCHEDULE OF MEMBERSHIP REVENUE BY PROVINCE

FOR THE YEAR ENDED DECEMBER 31, 1992

	Active	Affiliate	Support- ing	Student	Retired	Corporate	Licensing Body
Nfld.	\$ 54,510	\$ -	\$ -	\$ 50	\$ 198	\$ 1,728	\$ 2,860
P.E.I.	17,775	-	-	75	99	552	940
N.S.	166,295	-	-	2,506	296	5,088	8,480
N.B.	88,648	-	-	22	-	2,940	4,900
Que.	223,590	200,068	691	13,988	2,469	18,492	61,920
Ont.	914,025	114,155	5,728	12,311	4,640	45,564	117,540
Man.	195,722	-	-	1,855	296	6,114	10,190
Sask.	130,183	-	-	2,019	198	4,416	7,360
Alta.	529,893	-	-	4,022	593	17,184	28,640
B.C.	785,063	-	395	2,741	888	26,304	43,840
Other	-	7,900	5,135	731	288	-	-
	<u>\$3,105,704</u>	<u>\$322,123</u>	<u>\$11,949</u>	<u>\$40,320</u>	<u>\$9,965</u>	<u>\$128,382</u>	<u>\$286,670</u>

FOR THE YEAR ENDED DECEMBER 31, 1991

	Active	Affiliate	Support- ing	Student	Retired	Corporate	Licensing Body
Nfld.	\$ 50,005	\$ -	\$ -	\$ -	\$ 271	\$ 1,460	\$ 2,920
P.E.I.	16,425	-	-	-	183	480	980
N.S.	150,745	-	182	2,920	274	4,180	8,360
N.B.	80,300	-	-	-	274	2,390	4,780
Que.	348,022	112,450	1,460	14,625	2,555	14,580	61,600
Ont.	962,152	15,695	3,650	10,929	4,114	41,440	114,000
Man.	178,850	-	183	3,990	274	5,060	10,120
Sask.	121,590	-	-	2,195	183	3,615	7,230
Alta.	476,690	-	-	7,321	730	13,950	27,900
B.C.	712,298	-	532	3,491	1,278	21,150	42,300
Other	-	12,228	5,840	362	274	-	-
	<u>\$3,097,077</u>	<u>\$140,373</u>	<u>\$11,847</u>	<u>\$45,833</u>	<u>\$10,410</u>	<u>\$108,305</u>	<u>\$280,190</u>

McCAY, DUFF & COMPANY

CHARTERED ACCOUNTANTS

JOHN W. FRANKLIN, C.A.
THOMAS W. HOWARTH, C.A.
BRYAN E. SULLIVAN, C.A.
ALBERT G. MONSOUR, B.ADMIN., C.A.
BLAIR E. DAVIDSON, B.COMM., C.A.
G. WARREN TRICKEY, B.COMM., C.A.
ROBERT D. SHANTZ, B.MATH., C.A.

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AUDITORS' REPORT

To the Members of
Canadian Dental Research Foundation.

We have audited the balance sheet of the Canadian Dental Research Foundation as at December 31, 1992 and the statement of revenue and expense for the year then ended. These financial statements are the responsibility of the foundation's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects the financial position of the foundation as at December 31, 1992 and the results of its operations for the year then ended in accordance with generally accepted accounting principles.

McCay, Duff & Co.

Chartered Accountants.

Ottawa, Ontario,
April 9, 1993.

THE CANADIAN DENTAL RESEARCH FOUNDATION

BALANCE SHEET

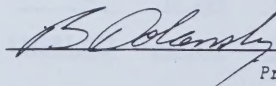
AS AT DECEMBER 31, 1992

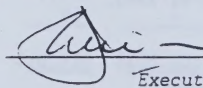
	ASSETS	1992	1991
CURRENT			
Cash		\$58,550	\$55,994
Accrued interest receivable		<u>259</u>	<u>240</u>
		58,809	56,234
INVESTMENT (note 2)		<u>5,000</u>	<u>5,000</u>
		<u>\$63,809</u>	<u>\$61,234</u>

MEMBERS' EQUITY

SURPLUS - BEGINNING OF YEAR	\$61,234	\$58,669
Net revenue for the year	<u>2,575</u>	<u>2,565</u>
SURPLUS - END OF YEAR	<u>\$63,809</u>	<u>\$61,234</u>

Approved on behalf of the Board:


 President


 Executive Director

THE CANADIAN DENTAL RESEARCH FOUNDATION

STATEMENT OF REVENUE AND EXPENSE

FOR THE YEAR ENDED DECEMBER 31, 1992

	<u>1992</u>	<u>1991</u>
REVENUE		
Interest	\$2,575	\$4,565
EXPENSE		
Award	<u>-</u>	<u>2,000</u>
NET REVENUE FOR THE YEAR	<u>\$2,575</u>	<u>\$2,565</u>

THE CANADIAN DENTAL RESEARCH FOUNDATION

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 1992

1. SIGNIFICANT ACCOUNTING POLICY

Basis of Accounting

Revenue and expenses are recorded on the accrual basis, whereby they are reflected in the accounts in the period in which they have been earned and incurred respectively, whether or not such transactions have been finally settled by the receipt or payment of money.

2. INVESTMENT

The investment is stated at cost, which approximates market value.

Cost

\$5,000 Hydro-Electric Power Commission
of Ontario 9% bond, due April 1, 1994

\$5,000

3. STATEMENT OF CHANGES IN FINANCIAL POSITION

Under generally accepted accounting principles, a statement of changes in financial position forms a part of the financial statements of an organization. In the case of the Foundation it would not provide additional useful information and consequently management is of the opinion it need not be included.

ASSOCIATION DENTAIRE CANADIENNE

ETATS FINANCIERS

31 DECEMBRE 1992

ASSOCIATION DENTAIRE CANADIENNE

INDEX AUX ETATS FINANCIERS

31 DECEMBRE 1992

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4	Etat des résultats
5	Fonds en fiducie pour la bibliothèque Etat des résultats et de l'avoir
6	Fonds "Grieve Memorial Lectureship" Etat des résultats et de l'avoir
7 & 8	Notes complémentaires
9	Tableau des revenus Cotisations Autre
10	Tableau des dépenses Services exécutifs Services professionnels
11	Tableau des dépenses Services aux membres Administration
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13	Rapport des vérificateurs
14	Bilan
15	Etat des résultats
16	Notes complémentaires

McCAY, DUFF & COMPANY

Page 1.

CHARTERED ACCOUNTANTS

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RAPPORT DES VERIFICATEURS

Aux membres de
l'Association Dentaire Canadienne

Nous avons vérifié le bilan de l'Association Dentaire Canadienne au 31 décembre 1992 ainsi que les états des résultats, de l'avoir et des résultats et de l'avoir du fonds en fiducie pour la bibliothèque et du fonds "Grieve Memorial Lectureship" pour l'exercice terminé à cette date. La responsabilité de ces états financiers incombe à la direction de l'Association. Notre responsabilité consiste à exprimer une opinion sur ces états financiers en nous fondant sur notre vérification.

Notre vérification a été effectuée conformément aux normes de vérification généralement reconnues. Ces normes exigent que la vérification soit planifiée et exécutée de manière à fournir un degré raisonnable de certitude quant à l'absence d'inexactitudes importantes dans les états financiers. La vérification comprend le contrôle par sondages des informations probantes à l'appui des montants et des autres éléments d'information fournis dans les états financiers. Elle comprend également l'évaluation des principes comptables suivis et des estimations importantes faites par la direction, ainsi qu'une appréciation de la présentation d'ensemble des états financiers.

A notre avis, ces états financiers présentent fidèlement, à tous égards importants, la situation financière de l'Association au 31 décembre 1992 ainsi que les résultats de son exploitation pour l'exercice terminé à cette date selon les principes comptables généralement reconnus.

McCay, Duff & Co.

Comptables agréés

Ottawa (Ontario)
1e 9 avril 1993

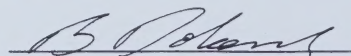
ASSOCIATION DENTAIRE CANADIENNE

BILAN

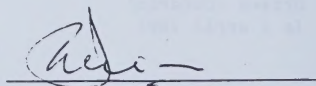
AU 31 DECEMBRE 1992

	ACTIF	1992	1991
ACTIF A COURT TERME			
Encaisse		851 973 \$	- \$
Comptes débiteurs		297 602	170 686
Stocks		85 439	87 216
Frais payés d'avance		422 010	173 836
		<u>1 657 024</u>	<u>431 738</u>
IMMOBILISATIONS (note 3)		<u>2 489 654</u>	<u>2 700 623</u>
		<u>4 146 678</u>	<u>3 132 361</u>
	ACTIF DU FONDS EN FIDUCIE		
Encaisse		19 432	15 542
Frais payés d'avance		15 446	10 528
		<u>34 878</u>	<u>26 070</u>
		<u>4 181 556 \$</u>	<u>3 158 431 \$</u>
	PASSIF		
PASSIF A COURT TERME			
Découvert bancaire		- \$	520 430 \$
Comptes créditeurs		418 215	591 335
Revenu reporté		1 270 350	1 183 585
Tranche de la dette à long terme		27 945	-
		<u>1 716 510</u>	<u>2 295 350</u>
DETTE A LONG TERME (note 4)		<u>1 455 856</u>	<u>-</u>
		<u>3 172 366</u>	<u>2 295 350</u>
	AVOIR		
Surplus		1 582 527	1 381 865
Fonds de réserve pour convention		252 676	191 590
Fonds "CDAnet" (déficit)		(860 891)	(736 444)
		<u>974 312</u>	<u>837 011</u>
	AVOIR		
Fonds en fiducie pour la bibliothèque		15 667	11 498
Fonds en fiducie "Grieve Memorial Lectureship"		19 211	14 572
		<u>34 878</u>	<u>26 070</u>
		<u>4 181 556 \$</u>	<u>3 158 431 \$</u>

Approuvé au nom des administrateurs:



Président



Directeur exécutif

ASSOCIATION DENTAIRE CANADIENNE

ETAT DE L'AVOIR

POUR L'EXERCICE TERMINE LE 31 DECEMBRE 1992

	<u>1992</u>	<u>1991</u>
SURPLUS		
SOLDE AU DEBUT DE L'EXERCICE	1 381 865 \$	1 754 530 \$
Revenus (dépenses) nets pour l'exercice	<u>200 662</u>	(<u>372 665</u>)
SOLDE A LA FIN DE L'EXERCICE	<u>1 582 527</u> \$	<u>1 381 865</u> \$
FONDS DE RESERVE POUR CONVENTION		
SOLDE AU DEBUT DE L'EXERCICE	191 590 \$	263 878 \$
Revenu de convention	650 828	420 084
Dépenses de convention	(<u>589 742</u>)	(<u>492 372</u>)
Revenus (dépenses) de convention nets pour l'exercice	<u>61 086</u>	(<u>72 288</u>)
SOLDE A LA FIN DE L'EXERCICE	<u>252 676</u> \$	<u>191 590</u> \$
FONDS "CDAnet"		
SOLDE (DEFICIT) AU DEBUT DE L'EXERCICE	(736 444 \$)	(541 877 \$)
Revenu du CDAnet	22 335	-
Dépenses du CDAnet	(<u>146 782</u>)	(<u>194 567</u>)
Revenus (dépenses) du CDAnet nets pour l'exercice	(<u>124 447</u>)	(<u>194 567</u>)
SOLDE (DEFICIT) A LA FIN DE L'EXERCICE	(<u>860 891</u> \$)	(<u>736 444</u> \$)

ASSOCIATION DENTAIRE CANADIENNE

ETAT DES RESULTATS

POUR L'EXERCICE TERMINE LE 31 DECEMBRE 1992

	1992		1991
	Budget	Réel	Réel
REVENUS			
Cotisations (page 9)	3 995 321 \$	3 906 982 \$	3 697 915 \$
Autres (page 9)	<u>1 614 100</u>	<u>1 816 791</u>	<u>1 442 511</u>
	5 609 421	5 723 773	5 140 426
DEPENSES			
Services exécutifs (page 10)	641 075	533 434	607 554
Services professionnels (page 10)	378 149	355 245	323 307
Services aux membres (page 11)	1 521 155	1 634 328	1 663 203
Administration (page 11)	<u>3 154 840</u>	<u>3 000 104</u>	<u>2 919 027</u>
	<u>5 695 219</u>	<u>5 523 111</u>	<u>5 513 091</u>
REVENUS (DEPENSES) NETS POUR L'EXERCICE	(<u>85 798</u> \$)	<u>200 662</u> \$	(<u>372 665</u> \$)

ASSOCIATION DENTAIRE CANADIENNE
FONDS EN FIDUCIE POUR LA BIBLIOTHEQUE

ETAT DES RESULTATS ET DE L'AVOIR
POUR L'EXERCICE TERMINE LE 31 DECEMBRE 1992

	<u>1992</u>	<u>1991</u>
REVENUS		
Intérêts	60 \$	279 \$
Dons	<u>22 000</u>	<u>14 920</u>
	22 060	15 199
DEPENSES		
Livres	5 484	7 330
Divers	391	-
Abonnements	<u>12 016</u>	<u>11 179</u>
	<u>17 891</u>	<u>18 509</u>
REVENUS (DEPENSES) NETS POUR L'EXERCICE	4 169	(3 310)
Avoir au début de l'exercice	<u>11 498</u>	<u>14 808</u>
AVOIR A LA FIN DE L'EXERCICE	<u>15 667 \$</u>	<u>11 498 \$</u>

ASSOCIATION DENTAIRE CANADIENNE
FONDS "GRIEVE MEMORIAL LECTURESHIP"

ETAT DES RESULTATS ET DE L'AVOIR

POUR L'EXERCICE TERMINE LE 31 DECEMBRE 1992

	<u>1992</u>	<u>1991</u>
REVENU		
Dons	6 000 \$	- \$
Intérêts	<u>817</u>	<u>1 071</u>
	6 817	1 071
DEPENSES		
Prix	<u>2 178</u>	<u>1 564</u>
REVENUS (DEPENSES) NETS POUR L'EXERCICE	4 639	(493)
Avoir au début de l'exercice	<u>14 572</u>	<u>15 065</u>
AVOIR A LA FIN DE L'EXERCICE	<u>19 211 \$</u>	<u>14 572 \$</u>

ASSOCIATION DENTAIRE CANADIENNE

NOTES COMPLEMENTAIRES

31 DECEMBRE 1992

1. PRINCIPALES CONVENTIONS COMPTABLES

(a) Revenus et dépenses

Les revenus et dépenses sont comptabilisés sur une base d'exercice qui consiste à comptabiliser les revenus et dépenses lorsqu'ils sont gagnés ou les charges engagées sans considération du moment où les transactions sont réglées par l'encaissement ou le déboursé d'une somme d'argent ou d'autre façon.

(b) Stocks

Les stocks sont évalués à la valeur nominale et à la valeur de réalisation nette.

(c) Amortissement

Les dépenses majeures d'actif immobilisé sont capitalisées et amorties tandis que les dépenses mineures sont imputées aux résultats de l'exercice.

L'amortissement est obtenue selon la méthode linéaire comme suit:

Immeuble	- 40 ans
Améliorations d'immeuble	- 10 ans
Mobiliers et équipements	- 10 ans
Équipement pour traitement de l'information	- 3 ans

(d) Régime de retraite de la direction

La contribution initiale faite au régime de retraite à cotisations déterminées est inclut dans les frais payées d'avance et est amortie par la méthode de l'amortissement linéaire pendant six ans.

2. FONDS "CDAnet"

Pendant les quatres dernières années, l'Association a développé un programme d'échange d'information électronique nommé "CDAnet." Au cours de 1990, l'Association est entré dans des engagements de convention avec plusieurs associations dentaires provinciaux au sujet de la distribution des revenus produient par le programme "CDAnet." Une des ententes de ces engagements permet à l'Association de récupérer les coûts de développement et d'opération reliés au "CDAnet." Au cas où les coûts d'opération ne sont pas récupérables, ils seront absorbés par le compte du surplus.

ASSOCIATION DENTAIRE CANADIENNE

NOTES COMPLEMENTAIRES

31 DECEMBRE 1992

3. ACTIF IMMOBILISE

	1992		1991	
	Coût	Amortissement accumulé	Net	Net
Terrain	82 915 \$	- \$	82 915 \$	82 915 \$
Immeuble	2 500 570	789 010	1 711 560	1 783 963
Amélioration de l'immeuble	630 503	295 303	335 200	382 341
Mobiliers et équipements	425 188	96 500	328 688	368 587
Équipement pour traitement de l'information	280 505	261 754	18 751	70 277
Chaîne de bureau	12 540	-	12 540	12 540
	<u>3 932 221</u>	<u>\$ 1 442 567</u>	<u>\$ 2 489 654</u>	<u>\$ 2 700 623</u>

4. DETTE A LONG TERME

	1992
Prêt hypothécaire, remboursables par versements mensuels de 14 038 \$ comprenant le capital et l'intérêt à 9,75%, échéant le 27 avril 2011, garantis par le terrain et l'immeuble	1 483 801 \$
Moins la partie à court terme	27 945
	<u>1 455 856</u> \$

Les versements en capital, remboursables au cours des cinq exercices financiers subséquents à 1992, s'établissent comme suit:

1993	27 945 \$
1994	30 736 \$
1995	33 805 \$
1996	37 182 \$
1997	40 895 \$

5. ETAT DE L'EVOLUTION DE LA SITUATION FINANCIERE

Sous les principes comptables généralement reconnus, cet état est une partie des états financiers de l'organisation. Dans ce cas, cet état n'a pas été préparé puisque la direction est de l'avis que cela ne fournirait aucunes informations supplémentaires utiles.

6. PASSIF EVENTUEL

L'Association est nommée en conjoint avec le Canadian Dental Service Plan Incorporated et les membres du conseil exécutif de l'ADC, dans une poursuite judiciaire par L'Association des chirurgiens dentistes du Québec concernant l'usage du surplus de la réserve dans le Régime d'assurance des dentistes du Canada. Les résultats de la poursuite ne sont pas déterminables. Jusqu'au 31 décembre 1992, approximativement 219 000 \$ ont été dépensés pour les frais légaux.

ASSOCIATION DENTAIRE CANADIENNE

TABLEAU DES REVENUS

POUR L'EXERCICE TERMINE LE 31 DECEMBRE 1992

	1992		1991
	Budget	Réel	Réel
COTISATIONS			
Actif	3 352 365 \$	3 105 704 \$	3 097 077 \$
Affilié	151 285	322 123	140 373
Soutien	13 430	11 949	11 847
Etudiant	51 238	40 320	45 833
Retraité	10 665	9 965	10 410
Système corporatif	131 148	128 382	108 305
Organismes des licences	280 190	286 670	280 190
F.D.I.	5 000	1 869	3 880
	<u>3 995 321 \$</u>	<u>3 906 982 \$</u>	<u>3 697 915 \$</u>
AUTRES			
Sondages d'accréditation	79 600 \$	89 710 \$	70 600 \$
Reconnaissance des produits au consommateur	40 000	38 009	45 000
P.T.A.D.	300 000	301 223	277 755
P.D.D.S. - marchandise	200 000	269 469	131 418
Bibliothèque	193 500	207 293	143 487
Conférences et séminaires	55 000	56 507	63 918
Journal	640 000	715 050	604 413
Propriété	25 000	63 265	30 127
Intérêts	30 000	27 105	15 969
Autres	51 000	49 160	59 824
	<u>1 614 100 \$</u>	<u>1 816 791 \$</u>	<u>1 442 511 \$</u>

ASSOCIATION DENTAIRE CANADIENNE

TABLEAU DES DEPENSES

POUR L'EXERCICE TERMINE LE 31 DECEMBRE 1992

	1992		1991
	Budget	Réel	Réel
SERVICES EXECUTIFS			
Conseil des gouverneurs	148 947 \$	133 797 \$	141 474 \$
Conseil exécutif	106 307	89 666	108 227
Comité de gestion	170 643	170 768	166 382
Dépenses du président	72 600	77 312	79 051
Statuts et règlements	1 878	1 198	1 315
F.D.I.	53 250	25 851	64 594
Relations entre les membres du système corporatif	22 400	20 701	26 954
Nominations	15 050	14 141	19 557
Nouveaux projets	50 000	-	-
	<u>641 075 \$</u>	<u>533 434 \$</u>	<u>607 554 \$</u>
SERVICES PROFESSIONNELS			
Accréditation	132 500 \$	143 186 \$	92 566 \$
Reconnaissance des produits au consommateur	12 500	12 408	9 904
P.T.A.D.	150 225	137 088	140 438
Matériaux et appareils dentaires	8 700	6 841	8 458
Spécialités dentaires	7 500	8 516	6 631
Education	32 500	16 809	27 465
Code professionnel	7 344	4 258	5 595
Communauté et institutions dentaires	14 380	26 139	20 169
Utilisation de ressources professionnelles	12 500	-	12 081
	<u>378 149 \$</u>	<u>355 245 \$</u>	<u>323 307 \$</u>

ASSOCIATION DENTAIRE CANADIENNE

TABLEAU DES DEPENSES

POUR L'EXERCICE TERMINE LE 31 DECEMBRE 1992

	1992		1991
	<u>Budget</u>	<u>R��el</u>	<u>R��el</u>
SERVICES AUX MEMBRES			
Relations gouvernementales	10 000 \$	5 727 \$	7 309 \$
Services d'information	291 360	407 054	323 848
Assurance et investissements	103 000	145 122	72 128
Adh��sion des membres	160 000	138 103	187 820
Publications	774 050	772 003	909 200
Activit��s ��tudiantes	91 895	99 313	86 783
Imp��t	10 000	3 532	3 635
Comit�� r��gime de soins dentaire	37 000	21 671	24 295
Biblioth��que	43 850	41 803	48 185
	<u>1 521 155 \$</u>	<u>1 634 328 \$</u>	<u>1 663 203 \$</u>
ADMINISTRATION			
Personnel	2 036 820 \$	1 943 763 \$	1 969 440 \$
Op��rations	551 200	519 625	537 851
Propri��t��	566 820	536 716	411 736
	<u>3 154 840 \$</u>	<u>3 000 104 \$</u>	<u>2 919 027 \$</u>

ASSOCIATION DENTAIRE CANADIENNE

TABLEAU DES REVENUS DES MEMBRES PAR PROVINCE

POUR L'EXERCICE TERMINE LE 31 DECEMBRE 1992

	Actif	Affilié	Soutien	Etudiant	Retraité	Système Corporatif	Organismes des Licences
T.N.	54 510 \$	- \$	- \$	50 \$	198 \$	1 728 \$	2 860 \$
I.P.E.	17 775	-	-	75	99	552	940
N.E.	166 295	-	-	2 506	296	5 088	8 480
N.B.	88 648	-	-	22	-	2 940	4 900
Que.	223 590	200 068	691	13 988	2 469	18 492	61 920
Ont.	914 025	114 155	5 728	12 311	4 640	45 564	117 540
Man.	195 722	-	-	1 855	296	6 114	10 190
Sask.	130 183	-	-	2 019	198	4 416	7 360
Alta.	529 893	-	-	4 022	593	17 184	28 640
C.B.	785 063	-	395	2 741	888	26 304	43 840
Autres	-	7 900	5 135	731	288	-	-
	<u>3 105 704 \$</u>	<u>322 123 \$</u>	<u>11 949 \$</u>	<u>40 320 \$</u>	<u>9 965 \$</u>	<u>128 382 \$</u>	<u>286 670 \$</u>

POUR L'EXERCICE TERMINE LE 31 DECEMBRE 1991

	Actif	Affilié	Soutien	Etudiant	Retraité	Système Corporatif	Organismes des Licences
T.N.	50 005 \$	- \$	- \$	- \$	271 \$	1 460 \$	2 920 \$
I.P.E.	16 425	-	-	-	183	480	980
N.E.	150 745	-	182	2 920	274	4 180	8 360
N.B.	80 300	-	-	-	274	2 390	4 780
Que.	348 022	112 450	1 460	14 625	2 555	14 580	61 600
Ont.	962 152	15 695	3 650	10 929	4 114	41 440	114 000
Man.	178 850	-	183	3 990	274	5 060	10 120
Sask.	121 590	-	-	2 195	183	3 615	7 230
Alta.	476 690	-	-	7 321	730	13 950	27 900
C.B.	712 298	-	532	3 491	1 278	21 150	42 300
Autres	-	12 228	5 840	362	274	-	-
	<u>3 097 077 \$</u>	<u>140 373 \$</u>	<u>11 847 \$</u>	<u>45 833 \$</u>	<u>10 410 \$</u>	<u>108 305 \$</u>	<u>280 190 \$</u>

MC CAY, DUFF & COMPANY

CHARTERED ACCOUNTANTS

JOHN W. FRANKLIN, C.A.
THOMAS W. HOWARTH, C.A.
BRYAN E. SULLIVAN, C.A.
ALBERT G. MONSOUR, B.ADMIN., C.A.
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ROBERT D. SHANTZ, B.MATH., C.A.

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RAPPORT DES VERIFICATEURS

Aux membres de
La Fondation Canadienne de
Recherches Dentaires,

Nous avons vérifié le bilan de la Fondation Canadienne de Recherches Dentaires au 31 décembre 1992 ainsi que l'état des résultats pour l'exercice terminé à cette date. La responsabilité de ces états financiers incombe à la direction de la fondation. Notre responsabilité consiste à exprimer une opinion sur ces états financiers en nous fondant sur notre vérification.

Notre vérification a été effectuée conformément aux normes de vérification généralement reconnues. Ces normes exigent que la vérification soit planifiée et exécutée de manière à fournir un degré raisonnable de certitude quant à l'absence d'inexactitudes importantes dans les états financiers. La vérification comprend le contrôle par sondages des informations probantes à l'appui des montants et des autres éléments d'information fournis dans les états financiers. Elle comprend également l'évaluation des principes comptables suivis et des estimations importantes faites par la direction, ainsi qu'une appréciation de la présentation d'ensemble des états financiers.

A notre avis, ces états financiers présentent fidèlement, à tous égards importants, la situation financière de la fondation au 31 décembre 1992 ainsi que les résultats de son exploitation pour l'exercice terminé à cette date selon les principes comptables généralement reconnus.

Mc Cay, Duff & Co.

Comptables agréés

Ottawa (Ontario)
le 9 avril 1993

BILAN

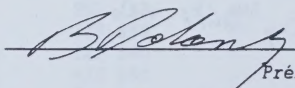
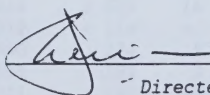
AU 31 DECEMBRE 1992

ACTIF	1992	1991
ACTIF A COURT TERME		
Encaisse	58 550 \$	55 994 \$
Intérêts courus à recevoir	<u>259</u>	<u>240</u>
	58 809	56 234
INVESTISSEMENT (note 2)	<u>5 000</u>	<u>5 000</u>
	<u>63 809 \$</u>	<u>61 234 \$</u>

AVOIR DES MEMBRES

SURPLUS AU DEBUT DE L'EXERCICE	61 234 \$	58 669 \$
Revenu net pour l'exercice	<u>2 575</u>	<u>2 565</u>
SURPLUS A LA FIN DE L'EXERCICE	<u>63 809 \$</u>	<u>61 234 \$</u>

Approuvé au nom du conseil d'administration:


Président
Directeur exécutif

LA FONDATION CANADIENNE DE RECHERCHES DENTAIRES

ETAT DES RESULTATS

POUR L'EXERCICE TERMINE LE 31 DECEMBRE 1992

	<u>1992</u>	<u>1991</u>
REVENU		
Intérêts	2 575 \$	4 565 \$
DEPENSE		
Prix	<u>-</u>	<u>2 000</u>
REVENU NET POUR L'EXERCICE	<u>2 575 \$</u>	<u>2 565 \$</u>

NOTES COMPLEMENTAIRES

31 DECEMBRE 1992

1. PRINCIPALES CONVENTIONS COMPTABLES

Revenus et dépenses

Les revenus et dépenses sont comptabilisés sur une base d'exercice qui consiste à comptabiliser les revenus et dépenses lorsqu'ils sont gagnés ou les charges engagées sans considération du moment au les transactions sont réglées par l'encaissement ou le déboursé d'une somme d'argent ou d'autre façon.

2. INVESTISSEMENT

L'investissement est comptabilisé au coût d'acquisition qui représente approximativement la valeur marchande.

Coût

Obligations de 5 000 \$ de la Commission d'Energie
Hydro Electrique de l'Ontario à 9%, échéant le 1^{er}
avril 1994

5 000 \$

3. ETAT DE L'EVOLUTION DE LA SITUATION FINANCIERE

Sous les principes comptables généralement reconnus, cet état est une partie des états financiers de l'organisation. Dans ce cas, cet état n'a pas été préparé puisque la direction est de l'avis que cela ne fournirait aucunes informations complémentaires utiles.

**GUIDELINES ON FEES FOR CDA SERVICES PROVIDED OR
SUPPORTED THROUGH CDA COUNCILS/COMMITTEES**

1. General policy on budget expenditures and related cost recovery or revenue generation for board approved activities is the responsibility of the CDA Board of Governors.
2. Senior staff, in consultation with the Executive Council liaison and the committee chair, is responsible for the administration of council/committee and program budgets.
3. Councils/Committees will be kept informed with respect to budgets of programs in which they have a primary involvement and consulted with respect to the introduction of fee increases for those programs.
4. CDA programs will be expected to be faithful to their goals and objectives, to operate on a cost recovery basis and to generate revenue beyond immediate costs when possible and not detrimental to the program or membership service.
5. Changes to fees and expenditures, and requests for new expenditures, which have not been approved during the regular budget approval process, must be directed to Management Committee for consideration and approval.
6. In reviewing fee increases for programs and services, CDA administration and committees involved will respect the principles of membership service, equity, fairness and value.
7. Access to CDA services and programs offered to individual dentists will be restricted to CDA members or the fee schedule will offer significantly lower fees to CDA members.

Approved by the Board of Governors
Canadian Dental Association
September, 1993

1994 Per Diem and Honoraria Rates

The honoraria rates for 1994 will be as follows:

President:	\$47,812
President-Elect:	\$23,906
Vice-President:	\$23,906

The per diem rates for 1994 will be as follows:

	President, Past-President President-Elect Vice-President <u>Chairman of the Board</u>		Executive Council		Council/Commission/ Committee Chairman, Presidential Appointees	
	<u>Full</u>	<u>Half</u>	<u>Full</u>	<u>Half</u>	<u>Full</u>	<u>Half</u>
<u>Meeting Days</u>						
Mon. to Fri.	860	430	600	300	400	200
Sat. - Sun.	430	215	300	150	200	100
<u>Travel Days</u>						
Mon. to Fri.	860	430	600	300	400	200
Sat. - Sun.	0	0	0	0	0	0

COMMITTEE ON NOMINATIONS, AWARDS AND TRUSTS

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

- Members:** Dr. Bryun Sigfstead, Edmonton - Chairman
Dr. Les Allen, Winnipeg
Dr. Jack Niedermayer, Regina
Dr. Kevin Roach, Pembroke
- Senior Staff:** Mr. Jardine Neilson, Executive Director
Mrs. Sandra Davis, Manager - Executive Services
- Coordinator:** Ms. Martyne S. Giroux

Committee Meetings

Since the August 1992 Annual Meeting of the Board of Governors, the Nominations, Awards and Trusts Committee met on April 29, 1993, in Toronto.

ITEMS REQUIRING BOARD ACTION

1. Solicitation of nominations for elective offices and vacancies was conducted in accordance with the By-Laws and terms of reference of the Committee.
2. All elective offices and vacancies for the 1993-94 term have been filled by eligible nominees. A nomination from the floor is required to fill a vacancy on the Nominations, Awards and Trusts Committee.

RESOLVED:

- 93.54** **THAT Dr. Bernard Dolansky be appointed to fill the vacancy on the Committee on Nominations, Awards and Trusts.**

ADOPTED

3. Elections will be held during the Annual Meeting of the Board of Governors in Ottawa, Ontario, September 10-11, 1993.
4. All nominees are unopposed, as indicated in the appended table. The list of nominees with biographical information is appended and comprises part of this report.
5. The Call for Nominations and the nomination form are appended.

APPENDIX I

APPENDIX II

RESOLVED:

- 93.55 **THAT one ballot be cast to elect those candidates to offices and vacancies where no opposition exists.**

ADOPTED**ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION****6. Committees of Executive Council**

The Committee reviewed the composition and current membership of Committees of Executive Council. The terms of members of Committees of Executive which require annual appointment could be continued indefinitely. However, in order for a Committee to thrive, and for the general membership to feel a continuing sense of ownership and involvement, membership on committees should not be extended beyond a maximum of six years as a general rule.

APPENDIX III

The Committee recognized that the need for continuity and expertise on certain Committees, such as Dental Materials and Devices and Taxation, must be balanced in order that the ability to meet members' needs through CDA programs not be jeopardized.

The staggering of terms for the CDAnet Committee was discussed. It was recognized that the level of Committee activity requires sensitivity in managing a turnover of membership. This matter will be brought to the attention of Management Committee.

A request from the Commission on Dental Accreditation of Canada for appointments to its Allied Dental Education Committee and the Health Facilities Committee was reviewed. Appointments will be discussed with the President.

The CDA membership status for individuals serving on CDA Councils/Committees was reviewed. Generally, non-member status is in contravention of the CDA By-Laws. Appropriate action will be taken to ensure that all individuals on CDA Councils/Committees are members of the CDA. Situations of concern will be brought to the attention of the President.

7. Definitions of CDA Awards

The Committee reviewed the definitions for CDA Awards and agreed a modification should be made to the definition of Honorary Membership in order that the wording stress national (CDA) involvement.

Executive Council approved the Committee's recommendation to amend the definition of Honorary Membership, as appended, to stress involvement at the national level.

APPENDIX IV

8. **Honorary Membership**

As quoted in the Terms of Reference, Honorary Membership is the highest award of the Association. Its purpose is to recognize individuals deemed to have made outstanding contributions to the art and science of dentistry, or to the dental profession, over a sustained period of time.

Although this award may be for service that is provincial, national or international in nature, an outstanding contribution at the national level shall be a principal consideration. It should in no way be viewed as an automatic award following a great number of years of practice and/or combination of above. Due to the distinctive nature of the Honorary Membership award, only in the most unusual circumstances will there be more than one or two awards conferred in any one year. An award each year shall not be considered a requirement.

The request for nominations for Honorary Membership was given a wide circulation including Corporate Members, Deans, Licensing Authorities, Specialty Sections and other dental organizations. In addition the CDA Journal was utilized as a vehicle to promote awareness of the awards process and, where appropriate, solicit nominees.

Executive Council approved the recommendation that no Honorary Memberships be conferred in 1993.

9. **Distinguished Service Award**

This award may be given to a dentist or other person to recognize either an outstanding contribution in a given year, or outstanding service over a number of years. It may also recognize outstanding contributions to the dental profession at the academic level, corporate level, specialty society, council or committee level. An award each year shall not be considered a requirement.

The request for nominations for the Distinguished Service Award was given a wide circulation including Corporate Members, Deans, Licensing Authorities, Specialty Sections and other dental organizations.

Executive Council approved the recommendation that the Distinguished Service Award be granted to: Dr. Mel Charendoff, Dr. John R. Robertson and Dr. Harry Rosen.

Background information is appended.

10. Award of Merit

This award will be conferred upon an individual CDA member who has served in an outstanding capacity in the governing of the Canadian Dental Association or similar outstanding contribution to Canadian dentistry, such as:

- at least 2 full terms as governor of the Association;
- at least 2 full terms on the Executive Council;
- a number of years of service to any dental organization, institution or specialty section;
- at least 4 years as a Council/Committee Chairman

The request for nominations for the Award of Merit was given a wide circulation including Corporate Members, Licensing Authorities, Speciality Sections and other dental organizations.

Executive Council granted the Award of Merit to: Brig.-Gen. J. Fred Begin, Dr. Allen MacLean, Dr. John E. Speck and Dr. Robert S. Turnbull.

Background information is appended.

APPENDIX VI**11. Certificate of Merit**

The Certificate of Merit recognizes any special service at any level of dentistry within the country. In general, it will be reserved for dentists and other persons who have given at least one full term of service in such areas as Councils/Committees of the Association, or long standing service at the corporate or specialty society level. An award each year shall not be considered a requirement.

Executive Council granted Certificates of Merit to:

Dr. Micheline Blain
Ms. Carol Clemenhagen
Mr. Cyril Gallant
Dr. William Glave
Dr. Jack Gryfe
Dr. Pat Johnson
Dr. Kerim Ozcan
Dr. David Precious
Dr. Brian Rocky
Dr. Wayne Stegges
Rev. Rondo Thomas

12. **Nicholas A. Mancini Boardroom**

The Committee requested that estimates be obtained for a suitable portrait of Dr. Nicholas Mancini to form part of the recognition of the designation of the main CDA Boardroom. A name plate for the Boardroom door should also be obtained recognizing its formal name.

Executive Council approved a recommendation that CDA proceed with suitable designation of the Nicholas A. Mancini Boardroom including a portrait and appropriate name plate.

13. **Past-President Pictures**

The Committee requested that estimates be obtained for the refinishing and reframing of CDA Past-Presidents' pictures. Executive Council approved a recommendation that CDA proceed with this project.

14. **Plaques**

The Committee requested estimates be obtained for plaques recognizing all past and present recipients of Honorary Membership and Distinguished Service awards.

Executive Council approved a recommendation that CDA obtain plaques recognizing past and present recipients of Honorary Membership and Distinguished Service Awards.

15. **Letters of Appreciation**

Letters of Appreciation will be forwarded to the following individuals:

Dr. Roger Bailey
Dr. Mac Balfour
Dr. William Bedford
Dr. Ralph Brooke
Dr. Deborah Cooper-Lall
Dr. Don MacFarlane
Dr. Karim Nanji
Dr. E.H. Yen

16. CDA President's Award

The list of recipients of the CDA President's Award for 1993 is appended.

APPENDIX VII

17. CEO's Candidacy - CDA Awards

Provincial associations and licensing bodies were canvassed for appropriate nominations for provincial CEOs.

APPENDIX VIII

18. Special Friend of Canadian Dentistry Award

The Special Friend of Canadian Dentistry Award is designed in appreciation and thanks for friendship and assistance to the CDA.

The Committee recommended that there be no recipients in 1993. However, it was suggested that a sub-category for this award be created to recognize other dental jurisdictions, including the dental industry. Executive Council supports the Committee in pursuing this matter and looks forward to receiving guidelines for this award from the Committee.

19. Appreciation

The Committee on Nominations, Awards and Trusts thanks all nominators for submitting nominees and continues to recommend that the provincial bodies be encouraged to recognize nominees through provincial awards.

20. Canada Volunteer Award

Nominations for candidates for the Canada Volunteer Award were solicited from members of the Board of Governors, Presidents & CEO's of Corporate Members and Presidents and CEO's of Specialty Sections.

No nominees were submitted for the Canada Volunteer Award for 1993.

21. Closing Comments by Chairman

I would like to express sincere thanks to the members of the Committee, as well as to Mr. Jardine Neilson, Mrs. Sandra Davis and Ms. Martyne Giroux for their assistance.

Respectfully submitted,

Bryun Sigfstead, D.D.S.,
Chairman, Committee on Nominations,
Awards and Trusts

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Committee on Nominations, Awards and Trusts.

NOMINATIONS - CDA ELECTIVE OFFICES - 1993

OFFICE/INCUMBENT	COMMENT	ELIGIBILITY	TERM	NOMINEES/AFFILIATIONS
<u>Chairman of the Board</u>				
Dr. N.A. Mancini	Annual Election	Active or Honorary Member	1 year	1. Dr. N.A. Mancini (Ont.)
<u>Vice-President</u>				
Dr. B. Sigftread (Alta)	Annual Election	Member of the CDA Board of Governors	1 year	1. Dr. J. Brookfield (Ont.)
<u>Executive Council</u>				
Dr. B. Dolman (Que)	Annual Election	Member of the CDA Board of Governors	2 years	1. Dr. B. Dolman (Que) 2. Dr. T. Gushue (Nfld) 3. Dr. R. Sandilands (Alta) 4. Dr. B. White (Sask)
<u>Constitution and Bylaws</u>				
Dr. M. Balfour (Ont.) 1993 Dr. G. Turner (NS) 1993 (1)	Annual Election	CDA Member with stipulations	3 years	1. Dr. M. Balfour (Ont.) 2. Dr. G. Turner (NS)
<u>Council on Education</u>				
Dr. M. Boyd (B.C./ACFD) 1993 (1) Dr. J. Epstein (B.C./CDA HOSPF) 1993 (1) Dr. J. Main (Ont. RGDC) 1993 (1) Ms. D. Wells (Ont. Lay Rep.) 1993 (1)	Annual Election to fill expired terms	CDA Member with stipulations	3 years	1. Dr. D. Donaldson (B.C.) 2. Dr. J. Epstein (B.C.) 3. Dr. J. Main (Ont.) 4. Ms. D. Wells (Ont)
<u>Ethics Committee</u>				
Dr. B. Creaser, (NS) 1993 (2)	Annual Election	CDA Member with stipulations to fill expired terms	3 years	1. Dr. B. Barrett (P.E.I.)
<u>Commission on Dental Accreditation of Canada</u>				
Dr. R. Brooke (Ont/ACFD/DEANS) 1993 (1) Dr. K. Roach (Ont/CDA) 1993 (1) Dr. D.J. Murphy (NS/CDA HOSPF/DENT) 1993 (1) Dr. J. B. C. (B.C./ACFD) 1993 (1) Dr. D. Robert (PQ/ACFD) 1993 (1) Ms. S. Sunell (BC/ACFD/AUXIL.) 1993 (1) Dr. K. Bentley (PQ/ACFD) 1993 (1) Dr. P.A. Watson (Ont/INDEB) 1993 (1) Dr. B.E. Leroy (Alta/LIC AUTH.) 1993 (1) Dr. M. Laske (Man/LIC AUTH.) 1993 (1) Mrs. M. Paquin (BC/RCDC) 1993 (1) Ms. M. Paquin (BC/CDAA) 1993 (1) Ms. M. Forsay (NS/CDHA) 1993 (1) Dr. I. Vogan (NS/IDENT. SPEC.) 1993 (1) Miss. D. Wells (Ont/LAY REP) 1993 (1)	Annual Election	CDA Member with stipulations to fill expired terms	2 years 3 years	1. Dr. R. Brooke (Ont) 2. Dr. K. Roach (Ont.) 3. Dr. D.J. Murphy (N.S.) 4. Dr. H. Dick (Alta) 5. Dr. D. Robert (PQ) 6. Ms. S. Sunell (BC) 7. Dr. K. Bentley (PQ) 8. Dr. P.A. Watson (Ont.) 9. Dr. B. E. Leroy (Alta) 10. Dr. M. Laske (Man.) 11. Dr. G. Maranda (PQ) 12. Mrs. M. Paquin (BC) 13. Ms. M. Paquin (N.S.) 14. Ms. M. Forsay (N.S.) 15. Miss D. Wells (Ont.)

BIOGRAPHICAL INFORMATION - Chairman of the Board

NAME: Nicholas A. Mancini

ADDRESS: 2188 King Street East
Hamilton, Ontario
L8K 1W6

DATE\PLACE OF BIRTH: April 23, 1922, Hamilton, Ontario

EDUCATION: Elementary - St. Ann's School, Hamilton
Secondary - Cathedral High School, Hamilton
B.A.(Chem. Physics, Biology) - University of Toronto
D.D.S. - University of Buffalo

EXPERIENCE: Served on original Foundation Committee for the Hamilton Theatre Auditorium Centre
Served on Hamilton Urban Renewal Committee
Served on Staff of Hamilton Civic Hospitals
Served on Board of Governors of Hamilton Civic Hospitals
Served Board of Directors of Social Planning and Research Council
Past Chairman, Ontario Separate School Trustees Association
Past Chairman, Canadian Catholic School Trustees Association
Past Chairman, Hamilton-Wentworth Roman Catholic Separate School Board
School Trustee and Chairman of Education Committee
Board of Directors, O.S.T.C.
Dominion Council of Health
Past President, Hamilton Academy of Dentistry
Past Grand Knight, Knights of Columbus, Hamilton
Member, Can Academy of Prosthodontists
Presently, Chairman, Board of Governors, ODA
Presently, Chairman, Board of Governors, CDA
Presently, Chairman of the Board, CDSPI

AWARDS: Accorded Papal Honor (Knighthood) Knight of St. Gregory
Barnabus Day Award (O.D.A)
CDA Honourary Membership

FAMILY Married - Josephine, October 10, 1949
3 sons, Michael Gerard, Nicholas Anthony Jr., John Patrick

BIOGRAPHICAL INFORMATION - Vice-President

NAME: James R. Brookfield

ADDRESS: Box 575, 58 Government Road West
Kirkland Lake, Ontario P2N 2E4

DATE OF BIRTH: March 12, 1947

PRACTICE: Private dental practice since 1971, Kirkland Lake,
Group practice with 5 dentists and 20 staff

**EDUCATION/
DEGREES:** New Liskeard Secondary School
D.D.S. University of Toronto, 1971

EXPERIENCE: Canadian Dental Association:
Director on the Board of Canadian Dental Association - 1991 - present
Executive Council - 1990 - present
Chairman, Committee on Ethics - 1988-1991
Governor - 1985 to 1989, 1990-present
Ontario Dental Association:
Service Award - 1993
Honours & Awards Committee - 1989-present
President, 1987-88
Executive Council, 1979-1989
President, Northern Ontario Dental Association, 1980
Past-President, Kirkland & District Dental Society
T.D.S.S. Hall of Fame Award, 1992

ORGANIZATIONS: Canadian Dental Association
Ontario Dental Association
Member, Royal College of Dental Surgeons of Ontario
Member, Pierre Fauchard Society

**COMMUNITY
ACTIVITIES:** Founding Chairman, Kirkland Lake Community Self Help Committee on drug/alcohol abuse
United Church of Canada Member
Masonic Lodge Member
Past Board Member, Kirkland Lake Chamber of Commerce
Executive, Rotary Club of Kirkland Lake for 6 years (member 15 years)
Kinsmen Club of Kirkland Lake - Past Member
Kirkland Lake Blue Devil Hockey Club,
Past Secretary Treasurer (3 years)

FAMILY: Married to Jane, with 5 children

BIOGRAPHICAL INFORMATION - Executive Council

NAME: Barry Howard Dolman

ADDRESS: 5885 Côte des Neiges
Suite 304
Montréal PQ H3S 2T2

DATE AND PLACE OF BIRTH: April 10, 1950
Montreal, Québec

EDUCATION: B.Sc., McGill University - 1971
D.M.D., University of Montreal - 1975

POSITION: Private Practice since 1975

EXPERIENCE: University of Montréal - Clinician & Lecturer
Department of Preventive & Community Dentistry, 1976-1986
Québec Dental Surgeons Association - Administrator, Montréal Region - 1985
Executive, Board of Directors - 1987 - present
AD-Hoc Committee of Insurance Expertise = 1989
First Deputy Executive Board -1990 -
Director, Executive Board - 1991 -
Canadian Dental Association; Board of Governors & Executive Council, 1989 - present

ORGANIZATIONS: Mount Royal Dental Society, 1975 - present
Ordre des dentistes du Québec - 1975 - present
National Dental Examining Board of Canada, 1975
Canadian Analgesia Society of Montréal, 1975
Royal College of Dental Surgeons of Ontario, 1977
College of Dental Surgeons of British Columbia, 1980
Alpha Omega Dental Fraternity, 1975

FAMILY: Married, four children

BIOGRAPHICAL INFORMATION - Executive Council

NAME: Toby Gushue

ADDRESS: Village Mall, Box 93
430 Topsail Road
St. John's, NF A1E 5Y5

**DATE AND PLACE
OF BIRTH:** November 26, 1942,
St. John's, NF

PRACTICE: General Practice

EDUCATION: Holy Cross High School
B.A. (Ed) 1964, Memorial University of
Newfoundland
B.A. Memorial 1968
D.D.S., Dalhousie University 1973

EXPERIENCE: General Practice, 1973 - to present
Governor CDA, 1987 - to present
Executive Secretary, NDA 1980-87
Member, Third Party Dental Plans
Committee 1984 - to present
Editor, NDA Newsletter
Teacher, St. John's 1964-69
Chairman, Continuing Education Committee,
NDA
Chairman, NDA Convention Committee
Instructor, Army Cadet Corps 1961-69

ORGANIZATIONS: Newfoundland Dental Association
Canadian Dental Association
Business Association of Newfoundland
and Labrador
Rotary International

FAMILY: Married to Eleanor

BIOGRAPHICAL INFORMATION - Executive Council

NAME: Richard D. Sandilands

ADDRESS: 224 Windermere Drive, R.R. #3
Edmonton, AB
T6H 4N7

EDUCATION: D.D.S. University of Alberta (1965)
Faculty of Science - University of Alberta
(1961)

POSITION: President - Canadian Health Advisory
Consortium Inc.
President, Richard D. Sandilands Dental
Management Services Ltd.

EXPERIENCE: Associate Clinical Professor - Faculty of
Dentistry, University of Alberta, 1991 to
present
Guest Lecturer - Faculty of Dentistry,
University of Alberta, 1974 to present
Clinical Instructor - Youville Geriatric
Centre Dental Clinic, The General Hospital
(Grey Nuns) of Edmonton, 1989 - 91
Chairman - Dentistry Task Force, Premiers
Commission on Future Health Care, 1988-89
Clinical Dental Practitioner, 1965-88

ORGANIZATIONS: Canadian Dental Association
Alberta Dental Association - President
(1988-89)
Western Canada Dental Society
Edmonton and District Dental Society
American Society of Preventive Dentistry
American Society of Dentistry for Children
Rotary International

AWARDS: Fellowship - Academy of Dentistry
International
Fellowship - American College of Dentists
Fellowship - Pierre Fauchard Academy
Fellowship - International College of
Dentists

FAMILY: Married with two children

HOBBIES: Hunting, fishing

BIOGRAPHICAL INFORMATION - Executive Council

NAME: Bernie White

ADDRESS: 801 CN Towers
Saskatoon, SK
S7K 1J5

**DATE AND PLACE
OF BIRTH:** January 6, 1948, Foam Lake, Saskatchewan

PRACTICE: Private Practice, General Dentistry
1972 to present

EDUCATION: D.M.D. University of Saskatchewan, 1972

EXPERIENCE: Canadian Dental Association:
Board of Governors, 1990 - present
Executive Council 1990 - present
Executive Liaison, Student Affairs Cttee. -
1990 - present
Executive Liaison, Constitution and Bylaws
1990 - present
Dental Insurance Consultant 1989 - present
National Dental Examining Board:
Clinical Examiner 1983-86
President, Saskatoon Dental Society 1980

COMMUNITY: Marian Gymnastics Club Executive 1979-80
East College Park Community Assn 1986-90

FAMILY: Married to Sharon 1971
Children - Robyn, Blair, Penny

HOBBIES/INTERESTS: Curling, Golf, Biking, Waterskiing, Skiing

BIOGRAPHICAL INFORMATION - Constitution and By-Laws

NAME: Dr. Mac Balfour

ADDRESS: 181 Church Street
Oakville, Ontario
L6J 1N3

EDUCATION: D.D.S. - Toronto

POSITION: Solo Practice - 1986 to present

EXPERIENCE: Dual Practice, 1977-86
Solo Practice, 1963-77
Oakville-Trafalgar Hospital Dental Service
1981-present
Canadian Dental Association:
Governor, 1986-present
Chairman, Constitution and By-Laws, 1992
CDAnet Committee, 1992-present
PRU Committee, 1990 - present
Ontario Dental Association:
President, 1989-90
EDI Committee, 1990 - present
Dental Practice Advisory Committee, 1992
Honours Awards, 1991 - present
Executive Council, 1985-87
President, Oakville Dental Society, 1978-84
President, Halton-Peel Dental Society, 1977

ORGANIZATIONS: Ontario Dental Association
Canadian Dental Association
Halton-Peel Dental Association
Oakville Dental Society

AWARDS: Service Award, Ontario Dental Association,
1984
Member, Pierre Fauchard Academy, 1993 -

BIOGRAPHICAL INFORMATION - Constitution and By-Laws

NAME: Gerald G. Turner

ADDRESS: 4 York Street
Glance Bay, N.S.
B1A 2L9

EDUCATION: School of Dentistry, Dalhousie University,
1960

POSITION: Medical Staff member, Glance Bay Community
Hospital
Medical Staff member, Glance Bay General
Hospital

EXPERIENCE: Glance Bay Community Hospital, Member of
Medical Advisory Committee
Medical Staff member: Glance Bay Community
Hospital & Glance Bay General Hospital
Past-President, Nova Scotia Dental
Association
Legislative Council, Nova Scotia Speech
Communication Association
Past President, Cape Breton Island Dental
Society

ORGANIZATIONS: Canadian Dental Association
Nova Scotia Dental Association
Nova Scotia Speech Communication Association

OTHER: Past-President, Glance Bay Schools Band
Parents Association

BIOGRAPHICAL INFORMATION - Council on Education (ACFD)

NAME: David Donaldson

ADDRESS: University of British Columbia
Faculty of Dentistry, Department of Oral
Medicine and Surgical Sciences
2194 Health Sciences Mall
Vancouver, B.C. V6T 1Z3

**DATE AND PLACE
OF BIRTH:** April 22, 1942
Scotland

EDUCATION: B.D.S., University of St. Andrews, 1966
Fellowship, Dental Surgery, Royal College of
Surgeons of Edinburgh, 1969
Master of Dental Surgery, University of
Dundee, 1971
Fellowship, General Anaesthesia, American
Dental Society of Anaesthesia, 1976

POSITION: Professor, University of British Columbia,
Faculty of Dentistry, Dept. of Oral Medical
and Surgical Sciences

EXPERIENCE: Lecturer, Department of Operative Dentistry,
University of Dundee, 1968-1971
Assistant Professor, University of British
Columbia, 1971
Associate Professor, UBC, 1974
Full Professor, UBC, 1982
Director of Clinics, UBC, 1984-1988
Assistant Dean, UBC, 1984-1986
Acting Head, Dept. of Oral and Maxillofacial
Surgery, 1984-1986
Head, Department of Oral Medicine and
Surgical Sciences, 1986-present
Acting Dean, UBC 1992-present

ORGANIZATIONS: College of Dental Surgeons of B.C.
Committee on Prelicensure, UBC & College of
Dental Surgeons of BC, 1990 - present
Canadian Dental Association 1971-present
Association of Canadian Faculties of
Dentistry, Chairman, Committee on Faculty
Chairmen, 1991-present
World Health Organization, Working Group
VIII on Impact of Changing Disease Patterns
on Dental Education, 1986-present
Canadian Society of Clinical Hypnosis, 1975-
present

BIOGRAPHICAL INFORMATION - Council on Education (CDA Hospital)

NAME: Joel B. Epstein

ADDRESS: Vancouver General Hospital
855 West 12th Avenue
Vancouver, BC V5Z 1M9

DATE OF BIRTH: April 14, 1952

EDUCATION: D.M.D., University of Saskatchewan, 1976
M.S.D., University of Washington, 1979
Certificate in Oral Medicine, University of Washington, 1979

POSITION: Private practice (referral), Oral Medicine
Cancer Control Agency of British Columbia
Clinical Director, Department of Dentistry,
& Head, Division of Oral Medicine & Clinical
Dentistry, Vancouver General Hospital
Clinical Assistant Professor, Faculty of
Dentistry, University of B.C.
Research Associate, Dept. of Oral Medicine,
University of Washington

EXPERIENCE: Chairman, Quality of Care Committee, Dept.
of Dentistry, Vancouver General Hospital,
1983-present
Consultant to the Editor, CDAJ, 1984-present
Associate, Division of Clinical Haematology,
Vancouver General Hospital, Oral Medicine
Services, 1982-present
Consultant, Columbia Centre for Pain and
Stress Management, Vancouver, 1982-86

ORGANIZATIONS: Canadian Dental Association
College of Dental Surgeons of B.C.
Vancouver and District Dental Society
American Academy of Oral Radiology
American Academy of Oral Pathology
Canadian Academy of Oral Pathology
International Association of Dental Research
American Academy of Oral Medicine
Organization of Teachers of Oral Diagnosis

OTHER: International Association for the Study of
Pain
Western (USA) Pain Society
AIDS Committee
Vancouver General Hospital, AIDS Committee

BIOGRAPHICAL INFORMATION - Council on Education (RCDC)

NAME: James Hamilton Prentice Main

ADDRESS: Faculty of Dentistry
University of Toronto
124 Edward St.
Toronto, Ontario M5G 1G6

**DATE AND PLACE
OF BIRTH:** June 7, 1933 - Biggar, Scotland

EDUCATION: Biggar High School
University of Edinburgh, 1955
Northwestern University Chicago, 1956
(Graduate program in oral surgery and
pathology)
Degrees - FDSRCS-Edin., B.D.S., Ph.D.

POSITION: Professor of Oral Pathology and Head,
Pathology Department, Faculty of Dentistry,
University of Toronto
Head, Department of Dentistry, Sunnybrook
Hospital, Toronto

EXPERIENCE: Past President, Royal College of Dentists of
Canada
Representative, RCDC, Council of Education
and Accreditation CDA, 1987-89

ORGANIZATIONS: Canadian Academy of Oral Pathology
President, International Association of Oral
Pathology, 1988

FAMILY: Married to Dr. Patricia A. Main
One son, one daughter

**BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada
(Lay Representative)**

NAME: Donna M. Wells

ADDRESS: 29 Broadpath Road
Don Mills, Ontario M3C 2B6

EDUCATION: Diploma in Nursing - Womens College Hospital
School of Nursing
Bachelor of Science in Nursing - University
of Toronto
Business Administration Courses - York
University

EXPERIENCE: Vice President, Seneca College, North York,
1986-92
Dean, Health Sciences, Seneca College, 1975-
86
Dean, Nursing, Seneca College, 1973-75
Founding Executive Director, York Regional
School of Nursing, North York, 1966-73
Head Nurse, New Mount Sinai Hospital,
Toronto, 1963-66
Nursing Teacher, Womens College Hospital
School of Nursing, Toronto, 1957-62
Head Nurse, Hamilton General Hospital,
Hamilton, 1956-57

ORGANIZATIONS: Canadian Dental Association, Commission on
Dental Accreditation, Lay Representative,
1990-present
Registered Nurses Association of Ontario,
1957-86
College of Nurses of Ontario, 1967-89
Canadian Nurses Association, 1984-89

OTHER: President, York Condominium Corporation
#180, 1983 to present
Member, Board of Directors, Community
Outreach in Education Foundation, 1991 to
present
Member, Board of Directors, Metro Toronto
V.O.N., 1984-85
Trustee, Board of Directors, Women's College
Hospital 1982-86

BIOGRAPHICAL INFORMATION - Ethics Committee

NAME: Brian Douglas Barrett

ADDRESS: 57 Inkerman Lane
Charlottetown, PEI
C1A 2P5

**DATE AND PLACE
OF BIRTH:** June 14, 1952
Halifax, Nova Scotia

EDUCATION: Colonel Gray High School
Mount Allison University
D.D.S. Dalhousie University, 1977

POSITION: Private Practice/Partnership
Registrar Dental Council of P.E.I.

EXPERIENCE: Executive Director, Dental Association of
P.E.I.
President, Eastisle Restaurant (1986) Ltd.
Instructor, Holland College
Member, Board of Directors - Charlottetown
Area Development Corp.

ORGANIZATIONS: Canadian Dental Association
P.E.I. Dental Association
Academy of Dentistry for the Handicapped
Academy of Geriatric Dentistry
Pierre Fauchard Academy
Green Gables Study Club

FAMILY: Married to Judy, with four children

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada
(ACFD/DEANS)

NAME: Ralph I. Brooke

ADDRESS: Faculty of Dentistry
University of Western Ontario
London, ON N6A 5C1

DATE OF BIRTH: April 25, 1934

EDUCATION: B.Ch.D., L.D.S., University of Leeds, 1957
M.R.C.S. (England), L.R.C.P. (London), 1963
F.D.S., R.C.S. (England), 1967
Certification in Oral Pathology (Ontario),
1974
F.R.C.D. (C), 1976
N.D.E.B./R.C.D.(C) - Specialist Certificate
in Oral Pathology, 1976

POSITION: Vice-Provost, Health Sciences, University of
Western Ontario
Dean, Faculty of Dentistry, University of
Western Ontario
Professor, Department of Oral Medicine,
University of Western Ontario
Chief, Department of Dentistry, University
Hospital
Honourary Lecturer, Department of Pathology,
University of Western Ontario
Honourary Lecturer, Department of Medicine,
University of Western Ontario
Consultant, Department of Dentistry, St.
Joseph's Hospital
Consultant, Department of Dentistry,
Victoria Hospital
Consultant, Department of Medicine,
University Hospital

EXPERIENCE: Professor and Chairman, Department of Oral
Medicine, University of Western Ontario,
1972-82
Senior Lecturer and Head of Department of
Oral Medicine and Pathology, Leeds
University Dental School and Hospital, 1968-
72
Consultant Dental Surgeon, United Leeds
Hospitals, 1968-72

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada (CDA)

NAME: Kevin L. Roach

ADDRESS: 351 Pembroke Street West
Pembroke, Ontario

DATE AND PLACE OF BIRTH: April 5, 1948
Renfrew, Ontario

EDUCATION: St. Columba's High School
B.Sc.; Laurentian University, 1969
D.D.S., University of Toronto, 1973

PRACTICE: Family and Preventive Practice

EXPERIENCE: Canadian Dental Association Commission on Accreditation, 1991 to present
CDA Nominations and Awards Committee, 1991 to present
Ontario Chairman for Pierre Fauchard Academy, 1991 to present
University of Toronto Dental Alumni Committee, 1991 to present
Chairman, Hygiene Supervision Committee, 1990-92
President, Canadian Dental Association, 1989
Elected CDA Executive Council, 1986
Re-elected CDA Governor, 1984
President, Ontario Dental Association, 1983
Elected CDA Governor, 1979
Elected Executive Council ODA, 1978
ODA Board of Governors, 1977

ORGANIZATIONS: Renfrew County Dental Society
Ottawa Dental Society
Ontario Dental Association
Canadian Dental Association
Federation Dentaire International
Academie Pierre Fauchard
American College of Dentists

OTHER: Colgate Oral Care Report - Editorial Board, 1991 to present

FAMILY: Married to Anne, with four children

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada, (CDA Hospital and Inst. Dentistry)

NAME: David J. Murphy

ADDRESS: 5943 Spring Garden Road
Halifax, Nova Scotia B3H 1Y4

DATE OF BIRTH: December 20, 1943

EDUCATION: St. Mary's University, B.A., 1966
Dalhousie University, D.D.S., 1970
New York University and Bellevue Hospital
Certificate in Oral Surgery, 1973
Oral Surgery F.R.C.D. (C), 1978

POSITION: Private Practice in Halifax
Assistant Professor, Division of
Periodontics Dalhousie University, 1984 to
present

EXPERIENCE: Assistant Professor of Oral Surgery,
Dalhousie University, 1973-82
Intern, Oral Surgery, Bellevue Hospital, New
York, New York, 1970
Resident, Oral Surgery, Bellevue Hospital,
1971-73
Courtesy Staff, I.W.K. Hospital for Children
Active Staff, Infirmary, Halifax
Consultant, Staff, Dartmouth General
Hospital
Consultant, Staff, Camphill Hospital,
Halifax
Head, Dept. Oral & Maxillofacial Surgery,
Dartmouth General Hospital

ORGANIZATIONS: Canadian Dental Association
Nova Scotia Dental Association
Halifax County Dental Society
Royal College of Dentists of Canada
Fédération Dentaire Internationale
CAOMS, Regional Councillor
Canadian Association of Oral & Maxillofacial
Surgeons, 1977-79
Convention Chairman, Canadian Association of
Oral & Maxillofacial Surgeons, 1976
President, Tarriff Committee, Society of
Dental Specialists of Nova Scotia, 1980-81.
Chairman, Atlantic Society of OMS, 1980
Chairman, N.S. Society of Dental Specialists
Board of Governors SMN, 1982-84

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada, (ACFD)

NAME: Henry Marvin Dick

ADDRESS: Faculty of Dentistry
University of Alberta
Dent/Pharm. Bldg.
T6G 2N8

DATE OF BIRTH: June 1, 1931
Brooks, Alberta

EDUCATION: High School Matriculation, Rosthern Junior College, 1950
First year B.Ed., University of Alberta, 1951-52
First year Arts & Science, University of Alberta, 1952-53
D.D.S. Program, University of Alberta, 1957
M.Sc. Programme, University of Manitoba 1968

POSITION: Associate Dean, Faculty of Dentistry, 1980 to present

EXPERIENCE: General Practice Dentistry, 1957-62
Republic of Congo under the Congo Protestant Relief Organization, 1963
General Practice Dentistry, 1964-66
Teaching and Research Fellow, University of Manitoba, 1966-67
Associate Professor, Faculty of Dentistry, University of Manitoba, 1968-74
Professor, Faculty of Dentistry, University of Alberta, 1974
Appointed Chairman, Division of Oral Pathology, 1976-83
President, Canadian Academy of Oral Pathology, 1977
Acting Chairman, Department of Oral Biology, 1983-84
President, NDEB, 1986-88
CDA Council on Education and Accreditation

FAMILY: Married with three children

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada (ACFD)

NAME: Denis Robert

ADDRESS: Faculté de médecine dentaire
Université Laval
Cité Universitaire
Ste-Foy, PQ G1K 7P4

DATE AND PLACE OF BIRTH: November 15, 1953
Nancy, France

EDUCATION: D.E.C., CEGEP F-X-Garneau, 1972
B.Sc.S., Laval University, 1975
D.M.D., Laval University, 1976
Certificate of advanced graduate study in
operative dentistry, Boston University, 1981
M.Sc.D. (operative dentistry), Boston
University, 1982

POSITION: Full Professor, Faculty of Dentistry,
University of Laval, 1991 to present

EXPERIENCE: Lecturer, Laval University, 1976-82
Assistant Professor, School of Dental
Medicine, Laval University, 1982-85
Professor, School of Dental Medicine, Laval
University, 1985-91

ORGANIZATIONS: Association canadienne de recherche dentaire
(CADR), 1988 to present
International Association for Dental
Research (IADR), 1988 to present
Comité de rédaction, Journal dentaire du
Québec, 1987 to present
Commission on Dental Accreditation of
Canada, 1989 to present
Bureau National d'Examen Dentaire du Canada
(NDEB), 1990 to present

OTHER: Numerous publications and scientific papers
Over 70 conferences on continuing education
in Quebec, Canada, United States and in
Europe since 1979.

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada, (ACFD/Auxiliary)

NAME: Susanne Sunell

ADDRESS: Dental Hygiene
Vancouver Community College
250 West Pender St.
Vancouver, B.C. V6B 1S9

EDUCATION: Bachelor of Arts, Queen's University, 1969-72
Diploma in Dental Hygiene, University of Toronto, 1972-74
Instructor's Diploma Program, University of British Columbia, 1982-84
Certified Orthodontic Assistant, University of British Columbia, 1984
Master's candidate, University of British Columbia, 1991 to present

POSITION: Department Head, Dental Hygiene Department, Vancouver Community College, 1987 to present

EXPERIENCE: Instructor, Dental Hygiene Program, Vancouver Community College, 1986 to present
Instructor, Certified Dental Assisting Program, Vancouver Community College, 1981-86

ORGANIZATIONS: Member of the CDSBC Education Committee
Member of the CDSBC Qualifications Review Subcommittee
Resource Person, Professional Development Council, Canadian Dental Hygienists' Association
Chair, ACFD Allied Dental Educators' Committee
ACFD/CDHA Representative to the CDA Council on Education

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada, (NDEB)

NAME: Kenneth Chessar Bentley

ADDRESS: Montreal General Hospital
1650 Cedar Avenue
Montreal, Quebec H3G 1A4

**DATE AND PLACE
OF BIRTH:** September 22, 1935
Montreal, Quebec

EDUCATION: D.D.S., McGill University, 1958
M.D., C.M., McGill University, 1962
Postgraduate, 1962-63
Junior Assistant Resident (Surgery), 1963-64
Recipient of Canadian Fund for Dental
Education Fellowship, 1964-66
Resident (Oral Surgery), Bellevue Hospital,
New York, 1964-65
Chief Resident (Oral Surgery), Bellevue
Hospital, 1965-66

POSITION: Chief of Dentistry, Montreal General
Hospital

EXPERIENCE: University Appointments:
1966-75, McGill University
1977-87, Dean, McGill University
Faculty Committees, 1966-75
Association of Canadian Faculties of
Dentistry, 1970-78
Various Hospital Appointments, 1966-81

ORGANIZATIONS: Association of Oral Surgeons of Quebec
Bellevue Society of Oral Surgeons
Canadian Dental Association
Can. Assoc. of Oral and Maxillofacial
Surgeons
International Assoc. for the Study of Pain
International Association of Oral Surgeons
Lafleur Report Society
Montreal Dental Club
Montreal Medico-Chirurgical Society
National Dental Examining Board of Canada
Order of Dentists of Quebec

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada
(NDEB)

NAME: Philip A. Watson

ADDRESS: Faculty of Dentistry
University of Toronto
124 Edward Street
Toronto, Ontario M5G 1G6

DATE OF BIRTH: May 18, 1943

EDUCATION: D.D.S., University of Toronto, 1967
M.Sc.D., Indiana University, 1970

POSITION: Professor, Department of Biomaterials,
University of Toronto
Consultant in Prosthodontics at the
University Hospital and St. Michael's
Hospital, Toronto
Private Practice: One day per week outside
the University

EXPERIENCE: Post Graduate Prosthodontics
Undergraduate Prosthodontics and Operative
Dentistry Graduate and Undergraduate
Biomaterials

ORGANIZATIONS: Canadian Dental Association
Ontario Dental Association
Association of Prosthodontists of Ontario
Canadian Academy of Restorative Dentistry
Association of Prosthodontists of Canada

AWARDS: Teaching Award: Recipient of the University
of Toronto Student's Administrative Council
Award for Excellence in Teaching in 1987-88.
First time awarded to Dentistry.

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada
(Licensing Authority)

NAME: Brian E. Leroy

ADDRESS: 101, 8230 105 Street
Edmonton, Alberta T6E 5H9

DATE OF BIRTH: October 18, 1949

EDUCATION: B.Sc., D.D.S., University of Alberta

POSITION: Registrar, Alberta Dental Association, 1990
to present

EXPERIENCE: Associateship dental practice with Dr. M.M.
Woronuk, Alberta, 1973-80
Solo general dental practice, Alberta, 1980-
87
Active member of the peace River District
Dental Society having served in most
executive positions including a five-year
term as Treasurer, 1973-87
Served on Ad Hoc Committee on Advertising,
Alberta Dental Association, 1982-83
Served on Peace River District Mediations
Committee, Alberta Dental Association, 1984-
87
Served on Peer Review Committee, Alberta
Dental Association, 1986-87
Associate Registrar, Alberta Dental
Association, 1988-90

OTHER: Served on the executive of the Fairview Golf
Club including five years as Secretary
Treasurer, 1973-83
Active member of the Rotary Club of Fairview
and Past-President (1976), 1974-87
Judge, Arts and Crafts, Alberta Agriculture,
1984-87
Active member of the Rotary Club of South
Edmonton, 1988 to present

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation on Canada
(Licensing Authority)

NAME: Michael Anthony Lasko

ADDRESS: 12 Seabrook Cove,
Winnipeg, Manitoba
R2J 3G2

**DATE AND PLACE
OF BIRTH:** May 6, 1944
Toronto, Ontario

EDUCATION: Gordon Bell High School, 1961
D.M.D., University of Manitoba, 1967

POSITION: Private General Practise, 1967 to present

EXPERIENCE: Part time clinical demonstrator, University
of Manitoba Faculty of Dentistry in
Restorative Dentistry, 1979-81
MDA Peer Review/Mediation Committee, 1977-80
MDA Social Allowance Review Committee, 1980-
83
Registrar Manitoba Dental Association, 1982-
present
Past CDA Council on Education &
Accreditation
Past CDA Council on Ethics

ORGANIZATIONS: Manitoba Dental Association
Canadian Dental Association
Winnipeg Dental Society
Commission on Accreditation
Advisory Committee, Manitoba Multiple
Prescription Program
MDA Dental Act Review Committee
MDA Dental Implant Committee
MDA Ethics Committee
MDA Infection Control Committee
Xi Psi Phi Fraternity
Alumni Association, University of Manitoba

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada
(RCDC)

NAME: Guy Maranda

ADDRESS: 822, Bellevue Avenue
Ste-Foy, Quebec
G1V 2R5

**DATE AND PLACE
OF BIRTH:** September 5, 1936
Paris, France

EDUCATION: B.A. - University of Ottawa
D.D.S. - University of Montreal
Graduate Studies - University of
Pennsylvania
Residency, Oral and Maxillofacial Surgery,
Geisinger Medical Center, Danville, PA

POSITION: Part-time teaching at Faculty of Dentistry,
University of Laval, (Oral Surgery)
Part-time private practice, Oral and
maxillofacial Surgery

EXPERIENCE: Private practice, 1965 to present
Teaching, 1970 to present

ORGANIZATIONS: Former President, CAOMFS, QAOMFS, Dental
Society of Quebec
President (1991-93) Royal College of
Dentists of Canada

OTHER: Consultant for:
Régie de l'Automobile du Quebec,
Commission Santé Sécurité du Travail,
Law Firms

FAMILY: Married to Monique Giguère, R.N., with three
children

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada (CDHA)

NAME: Margery G.E. Forgay

ADDRESS: School of Dental Hygiene
University of Manitoba
780 Bannatyne Ave.
Winnipeg, MB
R3E 0W2

EDUCATION: M.A., University of British Columbia, 1980
B.Ed., University of Manitoba, 1976
B.A., University of Saskatchewan, 1955
Diploma Dental Hygiene, Eastman Dental,
Rochester, N.Y., 1952

POSITION: Professor, School of Dental Hygiene,
University of Manitoba

EXPERIENCE: Acting Director, School of Dental Hygiene,
University of Manitoba
Director, School of Dental Hygiene,
Dalhousie University, 1985-90
Full-time teaching appointment, School of
Dental Hygiene, University of Manitoba,
1984-85
Sabbatical Leave, 1983-84
Acting Director, School of Dental Hygiene,
University of Manitoba, 1982-83
Full-time teaching appointment, School of
Dental Hygiene, University of Manitoba,
1977-82
Dental Hygienist, Private Practice (part-
time) to 1980
Dental Hygienist, Saskatchewan Department of
Health, 1952-1954

OTHER: University Committee Appointments:
Dalhousie University, 1985-1990
University of Manitoba, 1968-present

BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada
(Dental Specialties)

NAME: W. Ian Vogan

ADDRESS: 1545 Birmingham
Halifax, NS B3J 2J6

EDUCATION: B.D.S., St. Andrews University, Scotland
D.D.S., University of Southern California
Cert. in Periodontics, University of
Southern California

POSITION: Associate Professor, Periodontics, Dalhousie
University

EXPERIENCE: Founding Director-Post Graduate Programme in
Periodontics, Dalhousie University
Private Specialty Practice in Periodontics,
Halifax
Canadian Dental Association Committees:
Ethics Committee,
Committee on Consumer Products Recognition,
Organizing Chairman - Manpower Symposium,
Toronto, 1985,
Organizing Chairman - C.D.A. Convention,
Halifax, 1986
Past Governor for Nova Scotia, C.D.A. Board
of Governors

ORGANIZATIONS: Canadian Dental Association
Nova Scotia Dental Association

OTHER: Ten papers in Refereed Journal
Numerous presentations - Britain, France,
U.S.A. and Canada

**BIOGRAPHICAL INFORMATION - Commission on Dental Accreditation of Canada
(Lay Representative)**

NAME: Donna M. Wells

ADDRESS: 29 Broadpath Road
Don Mills, Ontario M3C 2B6

EDUCATION: Diploma in Nursing - Womens College Hospital
School of Nursing
Bachelor of Science in Nursing - University
of Toronto
Business Administration Courses - York
University

POSITION: Vice President, Seneca College, North York

EXPERIENCE: Dean, Health Sciences, Seneca College, 1975-
86
Dean, Nursing, Seneca College, 1973-75
Founding Executive Director, York Regional
School of Nursing, North York, 1966-73
Head Nurse, New Mount Sinai Hospital,
Toronto, 1963-66
Nursing Teacher, Womens College Hospital
School of Nursing, Toronto, 1957-62
Head Nurse, Hamilton General Hospital,
Hamilton, 1956-57

ORGANIZATIONS: Canadian Dental Association, Commission on
Dental Accreditation, Lay Representative,
1990-present
Registered Nurses Association of Ontario,
1957-86
College of Nurses of Ontario, 1967-89
Canadian Nurses Association, 1984-89

OTHER: President, York Condominium Corporation
#180, 1983 to present
Member, Board of Directors, Community
Outreach in Education Foundation, 1991 to
present
Member, Board of Directors, Metro Toronto
V.O.N., 1984-85
Trustee, Board of Directors, Women's College
Hospital 1982-86



MEMORANDUM

January 8, 1993

TO: Members of the Board of Governors
Presidents and CEO's - Corporate Members
Chairmen - CDA Councils, Committees
Presidents and Secretaries of Specialty Sections
ACFD - NDEB - RCD(C)
Provincial Registrars
Presidents - CDHA - CDAA
President - Canadian Hospital Association
Chairman, Commission on Dental Accreditation of Canada

CANADIAN
DENTAL
ASSOCIATION
L'ASSOCIATION
DENTAIRE
CANADIENNE

FROM: Dr. Bryun Sigfstead, Chairman,
Nominations, Awards and Trusts Committee

SUBJECT: CDA Call for Nominations 1993

-
1. Elections of officers and council, commission and committee personnel for the 1993-94 term will take place during the 1993 Annual Meeting of the Board of Governors in Ottawa, Ontario, September 10-11, 1993.
 2. Except in the case of nominations to the Committee on Nominations, Awards and Trusts itself, nominations from the floor during the Annual Meeting will not be valid unless vacancies are created by withdrawals from the list of nominations as presented by the Committee on Nominations, Awards and Trusts. The Board may then make further nominations from the floor.
 3. It is the duty of the Committee on Nominations, Awards and Trusts to:
 - (a) prepare a list of all elective offices to be filled;
 - (b) solicit nominations, excluding those for the Committee on Nominations, Awards and Trusts;
 - (c) rule on eligibility
 - (d) make further nominations as necessary, or as the Committee sees fit,
 - (e) submit a report to the Annual Meeting.

4. Nominations must be received before **April 12, 1993**.
5. Those entitled to make nominations are:

Members of the CDA Board of Governors
CDA Council, Committee, Commission Chairmen
Presidents or Secretaries of Corporate Members
Presidents or Secretaries of Specialty Sections
6. Nominees to the Council on Education will include recommendations of the:

Canadian Dental Association
Association of Canadian Faculties of Dentistry
National Dental Examining Board of Canada
Royal College of Dentists of Canada
Provincial Dental Licensing Authorities
Commission on Dental Accreditation of Canada
7. Appointments to the Commission on Dental Accreditation of Canada will include submissions of the:

Canadian Dental Association
Association of Canadian Faculties of Dentistry
National Dental Examining Board
Provincial Dental Licensing Authorities
Royal College of Dentists of Canada
Canadian Dental Assistants Association
Canadian Dental Hygienists Association
Commission on Dental Accreditation of Canada
Dental Specialties Committee
8. Nominations to the Committee on Community and Institutional Dentistry include a recommendation from the Canadian Hospital Association.
9. All nominations must be accompanied by:
 - (a) Written consent of the nominee.
 - (b) A completed conflict of interest statement by the nominee.

Failure to comply with these two requirements will nullify the nomination.

10. Except for the Executive Council (as otherwise indicated), election to Councils, Commissions and Committees is for a term of three years, renewable once. Members of Councils, Commissions and Committees must be Active, Affiliate, or Student Members of the Canadian Dental Association if they meet membership requirements; those who do not are exempt from the membership requirements. Affiliate members are not eligible for nomination for election to the Executive Council. Student members are not eligible for nomination for election to the Executive Council.

Nominations are not required for the Council on Insurance and Investment for reasons outlined in the following pages.

11. Nominations should be accompanied by a brief one-page biographical sketch of the nominee attached to the nomination form. Please use the form provided limiting your submission to one page. (A sample is included for your information).

**PLEASE FORWARD YOUR NOMINATION(S),
WRITTEN CONSENT OF NOMINEE'S
WILLINGNESS TO STAND FOR OFFICE
AND A BRIEF BIOGRAPHICAL SKETCH
OF EACH NOMINEE TO:**

**Dr. Bryn Sigststead, Chairman
Committee on Nominations, Awards and Trusts
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6**

DEADLINE: APRIL 12, 1993

- c.c. Committee on Nominations, Awards and Trusts
CDA Directors
CDA Information Officer

NOMINATIONS 1993

I. Vice-President

Term: 1 year

Eligibility: Member of the Board of Governors

Incumbent: Dr. B. Sigfstead, Edmonton

1. _____

II. Chairman of the Board

Term: Elected annually

Eligibility: Active or Honorary Member (may hold no other elective office during his tenure as Chairman)

Incumbent: Dr. N.A. Mancini, Hamilton
Eligible for re-election

1. _____

III. Executive Council - 10 members

Term: 2 years: renewable twice

Eligibility: Member of the Board of Governors

Incumbents: Dr. B. Dolansky, President

Dr. R. Wenn, President-Elect

Dr. B. Sigfstead, Vice-President

* No Incumbent, Past-President

Dr. J. Diggins, British Columbia, 1994 (1)

Dr. R. Sandilands, Alberta, 1993

Dr. B. White, Saskatchewan, 1993 (1)

Dr. J. Brookfield, Ontario, 1994 (2)

Dr. B. Dolman, Québec, 1993 (2)

Dr. T. Gushue, Newfoundland, 1993 (1)

* (Past-President serves from Annual Board Meeting until Fall Planning Session)

...2

Summary:

The Executive Council shall consist of the President, Immediate Past-President, President-Elect, Vice-President and six additional members. The Immediate Past-President serves from the annual meeting of the Board of Governors to the end of the second session of Executive Council. The Vice-President and six additional members shall be elected by the Board of Governors from its membership. The province from which a member is licensed and in which he practises the majority of his dental procedures or administration at the date of the Annual Meeting shall determine the province from which the candidate has been drawn. The six additional members shall consist of one each from the following regions:

- (a) Province of British Columbia
- (b) Province of Alberta
- (c) Provinces of Saskatchewan - Manitoba
- (d) Province of Ontario
- (e) Province of Québec
- (f) Provinces of New Brunswick, Nova Scotia, Prince Edward Island and Newfoundland.

If an incumbent in his non-elective year is elected Vice-President, the uncompleted term will be filled by presidential appointment.

Dr. Sandilands was named by presidential appointment to fill Dr. Sigfstead's unexpired term ending in 1993 and is eligible for election.

Dr. Les Allen retired as Past-President at the termination of the 1992 Fall Planning Session.

Drs. Gushue and White are completing their first terms on Executive Council and are eligible for re-election.

Dr. Dolman is completing his second term on Executive Council and is eligible for re-election.

- 4 to be elected
- 1. _____ Alberta
 - 2. _____ Newfoundland
 - 3. _____ Saskatchewan
 - 4. _____ Quebec

IV. **Council on Constitution and By-Laws: 4 members**

Term: 3 years: renewable once

Incumbents: Dr. M. Balfour, Chairman, Ontario, 1993

Dr. J. Silver, British Columbia, 1995 (2)

Dr. G. Turner, Nova Scotia, 1993 (1)

Dr. L. Stone, Alberta, 1995, (1)

Dr. Balfour was appointed Chairman in 1992. Dr. Peacock will continue with the Council as a consultant.

Dr. Balfour was named by presidential appointment to fill the unexpired term of Dr. Schiewe and is eligible for election.

Dr. Turner will complete his first term in 1993 and is eligible for re-election.

2 to be elected: 1. _____

2. _____

V. **Council on Education: 11 persons**

Term: 3 years: renewable once

Incumbents: Dr. G. Thompson, Chairman, (Alta) (CDA) 1994 (2)

Dr. J. Epstein (BC) (CDA HOSP) 1993 (1)

Dr. H. Lyttle (Man) (ACFD) 1995 (2)

Dr. R. Taché (Que) (ACFD) 1994 (1)

Dr. M. Boyd (BC) (ACFD) 1993 (1)

Ms. S. Sunell (BC) (ACFD/DENT. HYG) 1994 (1)

Ms. M. Symmes (Alta) (ACFD/DENT. ASST) 1994 (2)

Dr. R. Baker (Man) (NDEB) 1995 (2)

Dr. D. Bonang (NS) (LIC. AUTH) 1994 (2)

Dr. J. Main (Ont) (RCDC) 1993 (1)

Miss. D. Wells (Ont) (LAY REP.) 1993 (1)

...4

Summary:

In electing the membership of the Council, the Board of Governors will ensure that representation is constituted as follows:

- (1) One person nominated by the Canadian Dental Association.
- (2) One person who is active in Hospital and/or Institutional Dentistry nominated by the Canadian Dental Association.
- (3) Three persons from nominations by the Association of Canadian Faculties of Dentistry.
- (4) One person, being a dental hygienist, from nominations of the Association of Canadian Faculties of Dentistry's Dental Auxiliary Educators Section.
- (5) One person, being a dental assistant, from nominations of the Association of Canadian Faculties of Dentistry's Dental Auxiliary Educators Section.
- (6) One person from nominations by the National Dental Examining Board of Canada.
- (7) One person from nominations of the Provincial Dental Licensing Authorities.
- (8) One person from nominations by the Royal College of Dentists of Canada.
- (9) One lay person from nominations of the Council on Accreditation.

Council members Drs. Boyd, Epstein, Main and Miss Wells are finishing their first terms and are eligible for re-election.

- 4 to be elected:
1. _____ ACFD
 2. _____ CDA Hosp.
 3. _____ RCDC
 4. _____ Lay Rep.

...5

VI. Commission on Dental Accreditation of Canada: 15 members

Term: Chairman: 2 years renewable once
Members: 3 years renewable once

Incumbents: Dr. R. Brooke, Chairman, (Ont) (ACFD/DEANS) 1993 (1)
Dr. K. Roach, (Ont) (CDA) 1993 (1)
Dr. D.J. Murphy, (NS) (CDA HOSP. INST. DENT.) 1993 (1)
Dr. H. Dick, (Alta) (ACFD) 1993 (1)
Dr. D. Robert, (PQ) (ACFD) 1993 (1)
Ms. S. Sunell, (BC) (ACFD/AUXIL.) 1993 (1)
Dr. K. Bentley, (PQ) (NDEB) 1993 (1)
Dr. P.A. Watson (Ont) (NDEB) 1993 (1)
Dr. B.E. Leroy, (Alta) (LIC. AUTH.) 1993 (1)
Dr. M. Lasko, (Man) (LIC. AUTH.) 1993 (1)
Dr. G. Maranda, (PQ) (RCDC) 1993 (1)
Mrs. M. Paquin, (BC) (CDAA) 1993 (1)
Ms. M. Forgay, (NS) (CDHA) 1993 (1)
Dr. I. Vogan, (NS) (DENT. SPEC.) 1993 (1)
Miss. D. Wells, (Ont) (LAY REP) 1993 (1)

Summary:

In electing the membership of the Commission, the Board of Governors will ensure that representation is constituted as follows:

- (1) One person appointed by the Canadian Dental Association
- (2) One person who is active in Hospital and/or Institutional Dentistry appointed by the Canadian Dental Association
- (3) Three persons appointed by the Association of Canadian Faculties of Dentistry, one of which shall be a representative of the Committee of Deans
- (4) One person appointed by the Association of Canadian Faculties of Dentistry's Dental Auxiliary Educators Section
- (5) Two persons appointed by the National Dental Examining Board of Canada
- (6) Two persons appointed by the Provincial Dental Licensing Authorities
- (7) One person appointed by the Royal College of Dentists of Canada
- (8) One person appointed by the Canadian Dental Assistants' Association
- (9) One person appointed by the Canadian Dental Hygienists' Association
- (10) One person appointed by the Canadian Dental Association's Committee on Dental Specialties
- (11) A lay person appointed by the Commission on Dental Accreditation of Canada

In order to provide continuity on the Commission its Nominations Sub-Committee proposed in 1991, that the first terms of all positions on the Commission be extended to 1993. This was approved by the Board at the 1992 Annual Meeting. Elections of incumbents are required.

- 15 to be elected:
1. _____ (ACFD/DEANS)
 2. _____ (CDA)
 3. _____ (CDA HOSP. INST. DENT.)
 4. _____ (ACFD)
 5. _____ (ACFD)
 6. _____ (ACFD/AUXIL.)
 7. _____ (NDEB)
 8. _____ (NDEB)
 9. _____ (LIC. AUTH.)
 10. _____ (LIC. AUTH.)
 11. _____ (RCDC)
 12. _____ (CDAA)
 13. _____ (CDHA)
 14. _____ (DENT. SPEC.)
 15. _____ (LAY REP.)

...7

Further staggered second terms were proposed and approved by the Board. If all nominating bodies should agree to re-appoint their representatives the terms will be set as follows:

Dr. R. Brooke, Chairman, (Ont) (ACFD/DEANS) 1995 (2)
Dr. K. Roach, (Ont) (CDA) 1996 (2)
Dr. D.J. Murphy, (NS) (CDA HOSP. INST. DENT.) 1996 (2)
Dr. H. Dick, (Alta) (ACFD) 1994 (2)
Dr. D. Robert, (PQ) (ACFD) 1996 (2)
Ms. S. Sunell, (BC) (ACFD/AUXIL.) 1995 (2)
Dr. K. Bentley, (PQ) (NDEB) 1994 (2)
Dr. P.A. Watson (Ont) (NDEB) 1995 (2)
Dr. B.E. Leroy, (Alta) (LIC. AUTH.) 1996 (2)
Dr. M. Lasko, (Man) (LIC. AUTH.) 1994 (2)
Dr. G. Maranda, (PQ) (RCDC) 1995 (2)
Mrs. M. Paquin, (BC) 1994 (2)
Ms. M. Forgay, (NS) (CDHA) 1996 (2)
Dr. I. Vogan, (NS) (DENT. SPEC.) 1994 (2)
Miss. D. Wells, (Ont) (LAY REP) 1996 (2)

VII. **Committee on Ethics: 5 members**

Term: 3 years: renewable once

Incumbents: Col. M. Deyette, Chairman, Borden, 1995 (2)
Dr. B. Creaser, New Germany, 1993 (2)
Dr. B. Leroy, Edmonton, 1994 (1)
Dr. P. Lobb, Victoria, 1995 (1)

Summary:

Dr. Creaser is finishing his second and final term and a nomination is required.

1 to be elected: 1. _____

...8

VIII. Council on Insurance and Investment

The Canadian Dental Association has delegated to the Canadian Dental Service Plans Inc. the function of the Council on Insurance and Investment as a result of an agreement between the two organizations. This agreement is to be reviewed annually by the Board of Governors of the Canadian Dental Association and the Canadian Dental Service Plans Inc.

None to be elected.

IX. Committee on Community and Institutional Dentistry: 8 members

Term: 3 years: renewable once

Incumbents: Dr. W. Steggles, Chairman, (Ont) (G.P.) 1995 (2)
Dr. T. Petty, (AB) (G.P.) 1994 (1)
Dr. N. Farrell, (Ont) (PUB. HEALTH) 1995 (2)
Dr. G. Smith, (NF) (PEDIATRIC) 1994 (2)
Ms. J. Smorang, (Alta) (DENT. AUX) 1995 (1)
Dr. A. Dolan, (Ont) (CDN HOSP. ASSN) 1994
Dr. J. Hardie, (BC) (OR. BIOL./PATHO.) 1994 (2)
Dr. J. Chimilar, (Man) (O. & M. Surg.) 1995 (1)

Summary:

The Committee on Community and Institutional Dentistry shall reflect in its composition, representation of the major geographic regions of Canada, and will comprise 2 general dental practitioners, 1 oral and maxillofacial surgeon, 1 oral pathologist/oral biologist, 1 representative of public health dentistry, 1 representative of pediatric dentistry, 1 representative of dental auxiliaries, and 1 representative of the Canadian Hospital Association.

Dr. Dolan was named by presidential appointment to fill the un-expired term of Ms. Clemenhagen ending in 1994, at which time he will be eligible for election.

None to be elected.

...9

X. Committee on Nominations, Awards and Trusts: 4 members

Term: 3 years

Incumbents: Dr. B. Sigfstead, Chairman, Ottawa, 1993
Dr. J. Niedermayer, Regina, 1993
Dr. K. Roach, Pembroke, 1994
Dr. L. Allen, Winnipeg, 1995

Summary:

The Committee on Nominations, Awards and Trusts shall consist of three members elected by the Board at its Annual Meeting, pursuant to Article X, Section 6 of the By-laws, together with the Vice-President who acts as Chairman. The membership should be geographically representative of the Association and shall include one or more Past-Presidents.

As Vice-President Dr. Sigfstead was appointed Chairman by the President.

Dr. Niedermayer will complete his term in 1993 and a nomination from the floor is required

1 to be elected: 1. _____

NOMINATIONS FORM - CDA

One form must be completed for each candidate. Candidates must be eligible to assume office if elected (see conflict of interest by-law on reverse of this form, and specific regional or other stipulations for nominations on the attached memorandum).

PLEASE CHECK OR COMPLETE ONE OF THE FOLLOWING:

Nominations for: Chairman of the Board _____
 Vice-President _____
 Executive Council _____
 Council/Committee on _____

*** NOTE:** Affiliate members are not eligible for nomination to the Executive Council.
Student members are not eligible for nominations to the Executive Council.

PLEASE PRINT OR TYPE THE FOLLOWING:

Candidate's Name: _____

Candidate's Address: _____

Postal Code: _____

A brief one page biographical sketch **must** be attached to nominations.

In accordance with the stipulations of the Constitution as to regional or other representation, and, as to my entitlement to make nominations, I propose the above candidate for nomination.

PLEASE PRINT OR TYPE THE FOLLOWING

Nominator: _____ Office/Position: _____

Signature: _____

**** NOTE:** Please notify the candidate's provincial association identifying the candidate and the office, council or committee to which he/she has been nominated.

ACCORDING TO ARTICLE XXI SECTION I OF THE CONSTITUTION, THE FOLLOWING APPLIES:

CONFLICT OF INTEREST

- (a) Every member of the Board of Governors of the Association who has directly or indirectly any interest in any contract or transaction or in any business or undertaking which provides dental supplies or services of any kind to the dental profession, shall declare his material interest in the foregoing. He then will absent himself from discussion and voting on such contract or transaction.
- (b) If a Governor has made a declaration in compliance with the above provisions and he has not voted in respect of the contract or transaction, and if he has acted honestly and in good faith, he is not accountable to the Association for any profit or gain realized and the contract or transaction is not voided.
- (c) The above provisions apply automatically to the members of the various Commissions, Committees, and Councils of the Association, including the Executive Council. Each Board and/or Council, Commission or Committee member in order to make sufficient disclosure, is required to do so not only to his Council, etc., members but also to the Board of Governors in writing.
- (d) All nominees for election or appointment to Councils, Commissions or Committees of the Association, including the Executive Council shall declare on the nomination form, all possible potential conflicts of interest. These shall be made known to the Board prior to the election.
- (e) That, of itself, being a trustee of the CDA administered insurance and investment plans and/or of itself being a representative of the CDA to the Board of Canadian Dental Service Plans Incorporated shall not constitute a conflict of interest for a current member or a candidate for election to the Executive Council of the CDA.
- (f) A conflict of interest shall exist where a member of the Board of the CDA or any of its Councils, Commissions and Committees is privy to information that could be construed to be confidential and of benefit to that individual or any organization with which he may be associated. In such situations such a member shall be required to give an undertaking that such information be kept confidential.
- (g) The Board shall be the final authority on any disputed conflict of interest.

Article XXI Section I of the Constitution appears on page two of this nomination form. This Article deals with possible potential conflicts of interest.

NOMINEE WILL PLEASE INITIAL ONE OF THE FOLLOWING:

(a) I have no known possible potential conflict of interest _____

(b) I have possible conflict of interest _____

(if (b) please explain potential conflict on the reverse of this form)

I agree to permit my nomination and qualify by Active _____ Affiliate _____
Student _____ Membership in the CDA.

Membership in _____ (Corporate Member).

I agree to permit my nomination; I am not eligible for membership in CDA in the above categories _____.

NAME OF ORGANIZATION RECOMMENDING THIS NOMINATION

SIGNATURE OF NOMINEE _____

**PLEASE INDICATE ON REVERSE SIDE ANY POSSIBLE
POTENTIAL CONFLICT OF INTEREST:**

Return this completed form by April 12, 1993, to:

**Dr. Bryun Sigfstead, Chairman
Committee on Nominations, Awards and Trusts
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6**

CDA COMMITTEES OF EXECUTIVE COUNCIL

1. CDAnet Committee - 6 members

- Term: 2 years: renewable 3 times
- Eligibility: Special qualifications required
- Incumbents: Dr. D. MacFarlane, Vancouver - Chairman 1993 (2)
 Dr. R. Balfour, Oakville 1993 (2)
 Dr. T. Comishin, Kimberley 1994 (1)
 Dr. L. Dugal, Calgary 1993 (2)
 Dr. B. Glave, Aurora 1993 (2)
 Dr. T. Gushue, St. John's 1993 (2)
 Dr. D. Gutkin, Winnipeg 1993 (2)

° Number in brackets indicates term number

2. Consumer Product Recognition - 6 members

- Term: renewable annually
- Eligibility: Special qualifications required
- Incumbents: Dr. M. Eggert, Edmonton - Chairman 1993 (6)
 Dr. H. Limeback, Toronto 1993 (6)
 Dr. W.B. Chapple, Port Hope 1993 (13)
 Dr. E.C.S. Chan, Montreal 1993 (5)
 Dr. H.S. Sandhu, London 1993 (5)
 Dr. D. Haas, Toronto, 1993 (3)
 Dr. M. Akoury, (observer - Health & Welfare Canada)

° Number in brackets indicates number of years service

3. Convention Committee - General Chairman
 - Members (local arrangements support)

- Term: Annually appointed (Chairman)
- Eligibility: Special qualifications required
- Incumbents: Dr. M. Jahjah, Montreal - Chairman 1987

4. Dental Materials and Devices - 7 members

- Term: renewable annually
- Eligibility: Special qualifications required
- Incumbents: Dr. D. Jones, Halifax - Chairman 1993 (15)
Dr. P. Desautels, Montreal 1993 (16)
Dr. L. Johnson, London 1993 (16)
Dr. R. Roydhouse, Vancouver 1993 (10)
Dr. D. Smith, Toronto 1993 (16)
Dr. P.T. Williams, Winnipeg 1993 (15)
Dr. A. Chawla, (observer, Health & Welfare Canada)
Mr. G. Osterbauer, (observer, President, DIAC)
Ms. L. Leinan, (observer, Dept. of Industry Science
and Technology)

° Number in brackets indicates number of years service.

5. Communications Steering Committee - 5 members

- Term: Chairman - 2 years: non renewable
Members - TBD
- Eligibility: 1 member of Management
4 members of Executive Council
- Incumbent: Dr. R. Wenn, Charlottetown - Chairman 1993 (2)
Dr. J. Brookfield, Kirkland Lake 1993 (1)
Dr. J. Diggins, Vancouver 1993 (1)
Dr. T. Gushue, St. John's 1993 (1)

° Number in brackets indicates number of years service.

Ad-Hoc Membership Services - 4 members

- Term: Executive Council Members (Incumbents)
Other 2 years: renewable once
- Eligibility: Mandatory province representation, Quebec and Ontario Executive Council member, and a recent graduate from a Canadian dental school.
- Incumbent: Dr. B. Dolman, Montreal, Chairman 1993 (1)
Dr. K. Hockley, Windsor 1993 (1)
Dr. G. Austman, Steinback 1993 (1)
Dr. J. Brookfield, Kirkland Lake 1994 (2)

° Number in brackets indicates term number

6. Dental Specialties - 10 members

- Term: 3 years: renewable once
- Eligibility: representative from CDA recognized specialty sections
- Incumbent: Dr. I. Vogan, Chairman CAP 1993 (1)
Dr. J. Phillips, CAE 1993 (2)
*Vacant, CAOMS
Dr. C. Price, CAOR 1993 (2)
Dr. N. Farrell, CSPHD 1994 (1)
Dr. M. Wainwright, CAO 1995 (1)
Dr. V. Legault, CAPD 1994 (2)
Dr. R. Fischer, APC 1993 (1)
Dr. J. McComb, CAOP & RCDC (Observer) 1994 (1)

° Number in brackets indicates term number

* Dr. D. Precious completed his second term in 1992; no replacement was sought pending direction from Governors on the Committee's future.

7. Government Relations - 2 members

Term: 3 years: renewable once

Incumbents: Dr. B. Sigfstead, Chairman 1995 (1)
Dr. E. MacSween, Ottawa 1993 (2)

Sub-Committee on Medical Services Branch (Ad Hoc):

Dr. B. Sigfstead, Chairman
Dr. R. Thordarson
Dr. E. MacSween

Sub-Committee Canadian International Development Agency:

Dr. B. Sigfstead, Chairman

8. Taxation - 3 members

Term: renewable annually

Eligibility: Expertise required

Incumbents: Dr. R. Hicks, Chairman 1993 (14)
Dr. B. Sigfstead, Edmonton 1993 (1)
Dr. E. MacSween, Ottawa 1993 (6)

Summary: The members of the Government Relations Committee, shall also be the members of the Taxation Committee.

° Number in brackets indicates number of years service

9. Third Party Dental Plans - 4 members

Term: 2 years: 3 renewals

Eligibility: Special interests and qualifications

Incumbents: Dr. L. Dugal, Calgary, Chairman 1994 (2)
Dr. D. Anderson, Windsor, 1994 (2)
Dr. D. Tobias, Vancouver, 1993 (1)
Dr. A. Dean, New Waterford, 1993 (2)

NOTE: All Chairperson positions are subject to annual appointment or re-appointment by the President. Vacancies occurring during the year are filled by Presidential appointment in consultation with the Chairperson.

APPENDIX IV

Proposed

"Honorary Membership is the highest award of the Association. Its purpose is to recognize individuals deemed to have made outstanding contributions to the art and science of dentistry, or to the dental profession, over a sustained period of time.

Although this award may be for service that is provincial, national or international in nature, **an outstanding contribution at the national level shall be a principal consideration.** It should in no way be viewed as an automatic award following a great number of years of practice and/or combination of above. Due to the distinctive nature of the Honorary Membership award, only in the most unusual circumstances will there be more than one or two awards conferred in any one year. An award each year shall not be considered a requirement."

Bold: Indicates addition

BIOGRAPHICAL INFORMATION

NAME: Distinguished Service Award
Mel Charendoff

ADDRESS: 2901 Bayview Ave, North York, Ontario. M2K 1E6

EDUCATION/DEGREES: D.D.S. University of Toronto, 1959
M.S. University of Michigan, 1962
F.R.C.D.(C), 1976

EXPERIENCE: Private practice, 1962 - present

Professor, University of Toronto Paedodontic Dept,
1971 - present

Member, CDSPI Management Committee, 1975-91
President, CDSPI Management Committee, 1990
Member, Board of Governors, Ontario Dental
Association, 1969-75

Member, Executive Council, Ontario Dental
Association, 1971-75

President, Executive Council, Ontario Dental
Association, 1974-75

Member, Board of Governors, Canadian Dental
Association, 1973-76

Member, Communications Committee of the
Canadian Dental Association

Representative of Dentistry, Ontario Council of
Health, 1976-78

ORGANIZATIONS: Executive, Canadian Society of Dentistry for
Children

Ontario Dental Association

Pierre Fauchard Academy

COMMUNITY ACTIVITIES: Executive Council member, Parent Community
Association

BIOGRAPHICAL INFORMATION

NAME: John Robertson

ADDRESS: 216 Linden Ave, Summerside, P.E.I. C1N 4N4

DATE/PLACE OF BIRTH: January 4, 1939, Halifax, Nova Scotia

PRACTICE: General practice in Summerside, P.E.I.

EDUCATION: Dalhousie University Dental School (Honours), 1964

EXPERIENCE: President - Canadian Dental Association, 1986-87
President PEI Dental Association
PEI representative CDA Council on Health Care
CDA Governor representing P.E.I.
CDA Executive Council member
Past President Academy of General Dentistry
(Atlantic Provinces section)
Former Dental Examiner for National Dental
Examining Board of Canada
Served in the Canadian Dental Corps, retired as
Major

ORGANIZATIONS: Canadian Regent for the Academy of Dentistry
International
Former Chairman "Dentist of the Year" Atlantic
A.G.D.
Former Chairman Dental Division Prince County
Hospital, Summerside, PEI
Member of CDA, AGD, and PEI Dental
Associations
Fellow of International College of Dentists
Fellow of American College of Dentists
Fellow of Academy of Dentistry International
Member of International Association for
Orthodontics

COMMUNITY ACTIVITIES: Past member Board of Managers Summerside
Presbyterian Church
President of Prince County Woodcarvers Guild
Former member Summerside Y's Men's Club

FAMILY: Married to Elizabeth, with three children. Dr.
Robertson enjoys skiing, boating, golf and wood
carving.

BIOGRAPHICAL INFORMATION

NAME:	Harry Rosen
ADDRESS:	107-3545 Cote des Neiges, Montreal, Quebec. H3H 1V1
PRACTICE:	Restorative Dentistry Practice
EDUCATION:	D.D.S
EXPERIENCE:	Professor of Dentistry at McGill University, Faculty of Dentistry and Director of Graduate Prosthodontics Thirty-nine year contribution to the Faculty of Dentistry of McGill University through recruitment and training of full and part-time teachers in graduate and postgraduate programs, internships, study clubs and associateships in his private practice
ORGANIZATIONS:	Founding President, and Charter member of the Canadian Academy of Restorative Dentistry, 1964 Honorary Member, Canadian Academy of Restorative Dentistry, 1992 Dental Volunteer for Alexandra Contagious Disease Hospital, 1954-64 Served on Board of Neighbourhood House, 1956-66 Maimonides Award from Alpha Omega, 1981 Fellow - International College of Dentists, American College of Dentists, Conseil de la recherche dentaire du Québec, Canadian Academy of Prosthodontists, Association of Periodontology, American Academy of Periodontology Diplomate American Society of Osseointegration, 1992
COMMUNITY ACTIVITIES:	Board member of Canadian Friends of the Hebrew University and led a mission to Israel Member of the St. Patricks committee for sponsorship and adoption of Vietnamese boat people and the Canada Committee for Rescue of Ethiopian Phalasha Refugees
FAMILY:	Married to Dolores, with three children

BIOGRAPHICAL INFORMATION

	Award of Merit
NAME:	Brigadier General J. Frederick (Fred) Begin
ADDRESS:	1361 Turner Cres. Orleans, Ontario. K1E 2Y5
PLACE OF BIRTH:	Moncton, New Brunswick
EDUCATION/DEGREES:	B.Arts, University of Montreal, 1954 D.D.S., University of Montreal, 1959
EXPERIENCE:	Director General of Canadian Forces Dental Services, 1986-1993 Director, Dental Treatment Services, 1982-85 Commandant, Dental Services School, 1985-86 Commanding Officer, 15 Dental Unit, 1979-82 Director, Dental Treatment Services, NDHQ 1976-79 Base Dental Officer, Canadian Forces Base St. Jean, Quebec, 1972-76 Instructor, Canadian Forces Dental Services School in Borden 1970
ORGANIZATIONS:	Appointed Queen's Honourary Dental Surgeon (QHDS) - 1983 Member, Canadian and Ontario Societies of Public Health Dentists Past Member, Canadian Dental Association, Council on Health Care, 1976-82 Member, Canadian Standards Association Technical Committee on Dentistry, 1976-79 Member, Board of Governors, Canadian Dental Association (1987-1992) Consultant to Commission of Defence Forces Dental Services of the Fédération Dentaire Internationale Former Member, Conference of Provincial Secretaries and Licensing Authorities, the Association of Canadian Faculties of Dentistry, and the CDA Council on Education Fellow of the International College of Dentists Member, Pierre Fauchard Academy
AWARDS:	Order of Military Medical Merit (U.S. Army Dental Corps)
FAMILY:	Married to Blanche

BIOGRAPHICAL INFORMATION

NAME: Allen MacLean

ADDRESS: 271 Water Street, Summerside, P.E.I. C1N 1B5

EDUCATION: Dalhousie University Dental School, 1967

EXPERIENCE: Secretary-Treasurer-Registrar Dental Association of Prince Edward Island, 1967-74

Africa Inland Mission - Kijabe, Kenya, 1974-75

Provincial representative to Quality Assurance Committee, 1977-85

Representative to regional school board - chairman for three years, 1979-87

Chairman, Advisory Committee on Family Life Education, 1984-85

Representative, National Dental Examining Board, 1981-1992
and President, 1989-90

Member, accreditation survey teams - University of Manitoba Dental School (1985) University of Alberta (1986)

Examiner, UBC and the Univ. of Western Ontario

Member, Board of Trustees of the Prince County Hospital in Summerside, P.E.I., 1988-91

ORGANIZATIONS: Director, Dental Council of P.E.I. 1992-present

NDEB Dental Council of P.E.I.

COMMUNITY ACTIVITIES: Church Youth Leader, 1972-87

Church Deacon and Sunday School Teacher, 1972-93

BIOGRAPHICAL INFORMATION

Award of Merit

NAME:

John Speck

ADDRESS:301-145 Sheppard Ave East, North York, Ontario.
M2N 3A7**PRACTICE:**

Private practice Periodontics, 1952 - present

EDUCATION/DEGREES:D.D.S. University of Toronto, 1949
Diploma in Periodontics, University of Toronto, 1952**EXPERIENCE:**

Royal College of Dentists of Canada - Registrar-Secretary-Treasurer, 1967-present
Private Practice, Periodontics, 1952-present
University of Toronto, Faculty of Dentistry
Professor, 1988-90
Chairman - Dept of Periodontics, University of Toronto, 1971-88
Associate Professor, University of Toronto, 1967-71
Product Consultant - Dental Products Division, Proctor and Gamble, 1990-present
CDA Member of Product Acceptance Committee, 1983-86
CDA Member, Council on Education, 1970-73
Editorial Board, "Clinical Review", 1983-86
American Academy of Periodontology - Chairman, Annual Meeting 1981
Canadian Academy of Periodontology - President, 1970-71
Canadian Fund for Dental Education - Chairman, Advisory Committee, 1982-85
National Dental Examining Board Chairman, Examining Committee, 1970-73
Royal College of Dental Surgeons - Examiner in Chief, 1967-70

ORGANIZATIONS:

Canadian Dental Association
American Academy of Periodontology
Canadian Academy of Periodontology
American College of Dentists (F.A.C.D.)
Royal College of Dentists of Canada (F.R.C.D.)(C)

COMMUNITY ACTIVITIES:

Consultant for North York General Hospital and St. Michael's Hospital
Honourary Consultant for Hospital for Sick Children

BIOGRAPHICAL INFORMATION

NAME: Robert Stanley Turnbull

ADDRESS: 124 Edward Street, Faculty of Dentistry, Toronto,
Ontario. M5G 1G6

DATE/PLACE OF BIRTH: April 12, 1943, Toronto, Ontario

PRACTICE: General practice, 1966-69
Specialty of Periodontics (p/time), 1972-present
Associate professor, University of Toronto

EDUCATION/DEGREES: D.D.S., Faculty of Dentistry, University of Toronto
1966
Diploma in Periodontics, University of Toronto, 1971
M.Sc.D., University of Toronto, 1972

EXPERIENCE: Private Practice, Specialty of Periodontics,
1972-present
Assistant Professor, Faculty of Dentistry, University
of Toronto, 1973-75
Associate Professor, Department of Dentistry,
University of Toronto, 1976-present
Acting Chairman, Dept. of Periodontics 1991-92
Scientific Editor, Journal of Canadian Dental
Association, 1976-present
Editorial Board Member, CDAJ (1976-82)

ORGANIZATIONS: Member, Canadian Dental Association
Member, Ontario Dental Association
Member, Canadian Academy of Periodontology
Member, Ontario Society of Periodontics
Member, Omicron Kappa Upsilon Honour Dental
Society
Member, International Association for Dental
Research

COMMUNITY ACTIVITIES: Chairman, United Way Campaign, 1982-87
Member, Education Committee, Canadian Academy
of Periodontology, 1986-present

FAMILY: Married, one daughter

1993 RECIPIENTS OF THE CDA

PRESIDENT'S AWARD

<u>University</u>	<u>Recipient</u>
University of Alberta	Robert D. Kinniburgh
University of British Columbia	Edmund Nathan Wong
University of Manitoba	Ivan Michael Brian Hucal
Dalhousie University	Gregory Hiltz
Laval University	Chantal Blagdon
University of Western Ontario	Mark B. Eckler
University of Toronto	Hiroshi Urabe
McGill University	Donal C. Flanagan
University of Montreal	Julie Busque
University of Saskatchewan	Ronald George Ritsco



MEMORANDUM

January 11, 1993

TO: Presidents - Provincial Dental Associations
and Provincial Licensing Bodies

FROM: Dr. Bryun Sigfstead, Chairman,
Nominations, Awards and Trusts Committee

SUBJECT: CEO's Candidacy for CDA Awards

**CANADIAN
DENTAL
ASSOCIATION
L'ASSOCIATION
DENTAIRE
CANADIENNE**

In 1989, the Executive Council approved a recommendation of the Nominations, Awards and Trusts Committee that future Committees be encouraged to review the contributions made by Provincial and Licensing Bodies - CEO's across Canada and consider such persons for awards as appropriate.

Attached for your consideration are the guidelines for awards of the Canadian Dental Association and the list of individuals who have been recipients of these awards. I would request that you review these guidelines and consider the submission of nominations as you deem suitable.

It is intended that awards be bestowed at the Annual Meeting of the CDA Board of Governors in Ottawa, September 10, 1993. As you are no doubt aware, all awards are designated by the Executive Council and it would be appreciated therefore if you would submit your recommendation no later than March 31, 1993.

Attachment

CANADIAN DENTAL ASSOCIATION

A W A R D S

There are four categories of major awards: Honorary Membership, Distinguished Service Award, Award of Merit and Certificate of Merit.

1. Honorary Membership

Honorary Membership is the highest award of the Association. Its purpose is to recognize the individual deemed to have made outstanding contributions to the art and science of dentistry, or to the dental profession, over a sustained period of time. Although this award may be for service that is provincial, national or international in nature, an outstanding contribution at the national level shall be a principal consideration. It should in no way be viewed as an automatic award following a great number of years of practice and/or combination of above. Due to the distinctive nature of the honorary membership award, only in the most unusual circumstances will there be more than one or two awards conferred in any one year. An award each year shall not be considered a requirement.

Nomination

Candidates must be nominated by the Honors and Awards Sub-Committee with input and consultation with the corporate bodies and/or appropriate affiliated organizations. All nominations and supporting documents are to be reviewed by the Honors and Awards Sub-Committee and recommendations referred to the Executive Council.

Format: The Format of this award should be a personalized parchment scroll, and an appropriate lapel medal.

It is proposed that honorary members (if they are licensed dentists) be exempt from payment of the CDA portion of the annual licence fee, but that they retain all of the rights and privileges of an active member. In addition, an honorary member and companion may attend both the scientific and social functions and the annual meetings and conventions held under the auspices of the Association without payment of a registration fee.

Presentation: This award shall be presented at a suitable formal occasion at the annual meeting by the President of the Association.

2. Distinguished Service Award

This award may be given to a dentist or other person to recognize either an outstanding contribution in a given year, or outstanding service over a number of years. It may also recognize outstanding contributions to the dental profession at the academic level, corporate level, specialty society, council or committee level, an award each year shall not be considered a requirement.

Nomination

Candidates must be nominated by the Honors and Awards Sub-Committee with input from the consultations with the corporate bodies and/or appropriate affiliated organization. Although it would be normal to present only one distinguished service award in a given year, it should be possible under exceptional circumstances to award more than one distinguished service award in a particular year.

Format: The format of this award shall be an appropriately engraved plaque.

Presentation: This award shall be presented at a suitable formal occasion by the President of the Association.

3. Award of Merit

The award will be conferred upon an individual who has served in an outstanding capacity in the governing of the Canadian Dental Association or similar outstanding contributions to Canadian Dentistry.

- at least 2 full terms as governor of the Association;
- at least 2 full terms on the Executive Council;
- a number of years of service to any dental organization, institution or specialty section;
- at least 4 years as a Council/Committee Chairman

A specific number of awards should not be mandatory in any given year. Automatic receipt of this award should not be assumed because of the fulfilment of any or all of the above requirements. An award in this category shall not be considered mandatory on an annual basis.

Nomination

Nominations in this category will be initiated by the Sub-Committee on Nominations, in consultation with various resources available to them.

Format: The format of this award shall be an appropriately engraved wall plaque.

Presentation: The awards will be presented at a suitable formal occasion, depending on the position and location of the recipient of the award. Wherever possible, the President of the Association or his designate will present the award.

4. Certificate of Merit

This award is to recognize any special service at any level of dentistry within the country. In general, it will be reserved for dentists and other persons who have given at least one full term of service in such areas as councils of the Association, or long standing service at the corporate or specialty society level. An award each year shall be considered a requirement.

Nomination

The Honors and Awards Sub-Committee will receive and review the nominations and/or nominate candidates. Nominations, together with any supporting documents, shall be referred to the Executive Council.

Format: The format of this award shall consist of a hand-lettered parchment scroll.

Presentation: The award shall be presented at a suitable formal occasion, depending on the position and location or the recipient of the award. Whenever possible, the President of the Association or his designate shall present the award.

5. **Letter of Appreciation**

A letter of appreciation will be written by the President of the Association to all other contributors at a committee or council level who do not qualify for the other awards by either time or qualifications.

6. **Past-President Award**

To recognize service and contributions as President of the Association

Format: The format shall be a past-president lapel pin and an appropriately engraved plaque.

Presentation: This award shall be presented at an appropriately formal occasion, whenever possible in conjunction with the annual meeting of convention.

OTHER AWARDS

1. **Canadian Fund for Dental Research**

- \$2,000 bi-annually
- To be presented at an official CDA Function
- The recipient is to be funded to present the research paper at the ACFD/CADR Bi-annual meeting, if he/she so desires.
- The recipient is to be funded to attend the CDA Convention in the year in which he/she won the award.

2. **Universities**

CDA President's Award

To be awarded to a graduating student in every dental faculty in the country.

Must be a student CDA Member

Nomination

The winners are to be selected by each Faculty Awards Committee. Each winner is to be a graduating student from the undergraduate program who, over his/her undergraduate years, has shown outstanding qualities of leadership, scholarship, character, and humanity and who may be expected to have a distinguished career in the dental profession and society at large.

This award may be withheld on recommendation of a Faculty Awards Committee in the event there is no sufficiently qualified candidate.

Format: A cheque in the amount of \$250.00 plus a hand-lettered parchment scroll.

Presentation: The award will be presented at a suitable formal occasion, depending on the position and location of the recipient of the award. Wherever possible, the President of the Association or his designate will present the award.

Revised 07/93

COMMITTEE ON STUDENT AFFAIRS

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Mahnaz Fatahzadeh, Vancouver, Chairman
Dr. Marco Chiarot, Halifax, Student Governor
Dr. Deborah Cooper-Lall, Calgary, Past Chairman
Dr. Karim Nanji, Toronto, Past Student Governor
Mr. Gregg Mitton, Dalhousie University, Chairman-Elect
Mr. Kevin Davis, University of Toronto, Student Governor-Elect
Ms. Kimberly Wenn, Dalhousie University
Mr. Amir Ajar, McGill University
Mr. Navid Sarooshi, University of Toronto
Mr. Hugh Leung, University of British Columbia
Mr. Patrick Finnegan, University of Alberta
Mr. Keith Chamberlain, Université Laval
Mr. Todd Jarotski, University of Saskatchewan
Mr. Robert Groh, University of Western Ontario
Mr. Chahin Kordlouie, Université de Montréal
Mr. Cory Sul, University of Manitoba

Executive

Liaison: Dr. Richard Sandilands, Edmonton

Senior Staff: Ms. Linda Teteruck, Director of Communications

Coordinator: Mrs. Win Mobley

1. Committee Meetings

The Committee on Student Affairs, (CSA), has met once since the 1993 Interim Board Meeting, on June 6, 1993. This meeting occurred in conjunction with the 1993 CDA/CFDE Canadian Dental Students' Conference, (CDSC'93), held on June 5. These two meetings represent the initiation of the new structure of the CSA.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

2. Certification and Licensure of Canadian Graduates

After presentations by representatives of the National Dental Examining Board of Canada, and the Association of Canadian Faculties of Dentistry, the Committee addressed the recent activities in the area of certification and licensure of Canadian graduates, to determine the direction Canadian dental students should now take to

not only reiterate their disapproval of further examination by the NDEB of Canadian dental graduates upon completion of their dental program, but also to express their concern at the proposal that students be responsible for either the total or partial cost of the examination. Student concern over fees for the examination is serious, as the debt load of a high percentage of graduating students is well known to be substantial, and a significant number of new grads have not found employment when they graduate.

Students are also questioning whether the NDEB certificate will provide complete portability to all provinces as a result of the examination process that the provincial authorities are requesting.

The Committee expressed concern that many practising dentists are unaware of the proceedings of this ongoing issue. They feel if it were better known, members would not be opposed to a small increase in their licensing fees to help defray examination costs, in order to provide Canadian graduates with full portability and the quality assurance of graduates. In this way, both new grads and established practitioners would, on an ongoing basis, contribute to the costs of the examination on a yearly basis.

In order to make their position known, not only to practising dentists, but to the licensing authorities, dental faculties and the NDEB, the CSA will develop a position paper that will address the student concerns on licensure, with special emphasis on the issues of division of funding for the examination and complete national portability.

The CSA hopes that the CDA will consider the student perspective in future discussion on this issue and that CDA will continue to play a constructive role in bringing forward the student view.

The student paper on certification and licensure was not available for review at the Executive Council Pre-Board meeting.

APPENDIX I

3. Elections

The CSA held its annual election for the positions of Chairman-Elect and Student Governor-Elect. Mr. Navid Sarooshi, University of Toronto, and Mr. Cory Sul, University of Manitoba, were elected to these positions, respectively.

4. **Student Membership**

Although Board approval had been given to the concept of a four/five year student membership package in 1992, whereby students entering first year will pay for CDA membership for the official duration of their program, (4 or 5 years (Saskatchewan)), it was not instituted in 1992 because it was felt that further investigation should be carried out at the schools to ensure the plan would not have a negative affect on membership.

As a result of positive feedback from their peers, the program will be instituted this September, with details on refunds, backpayment, etc. to be decided upon prior to this date. The adoption of this program will enable reps to spend more time communicating CDA benefits and services to their student bodies.

CSA therefore reiterates for Board review its recommendations in this area.

5. **Publication of Student Issues & Concerns in the CDA Journal**

In recognizing the position paper as an excellent vehicle to the appropriate organizations for common student concerns and issues, it was also the Committee's desire to publish position papers, in their entirety, in the CDA Journal in the space allocated as the student column.

In addition to student concerns in the areas of certification and licensure, discussion revealed several areas which the Committee feels require further attention. Two issues of concern, apart from licensure, which are ongoing at most Canadian faculties, are related to curriculum and student/staff relations.

These subjects will be positioned in a CSA paper, to be developed for presentation to the ACFD and CDA Board of Governors.

The student paper on Student/Staff Relations was distributed at the Executive Council Pre-Board meeting. Executive Council has not reviewed the document.

APPENDIX II

6. **Association of Canadian Faculties of Dentistry**

Further to discussions at the September 1992 CSA meeting concerning CDA representatives attending local ACFD school committees, it was the opinion of the Committee that this area of involvement for CDA representatives should be pursued. Members were encouraged to approach their local ACFD representatives with this request. It is felt student participation at the ACFD annual meeting would be more informed if based on affiliation through the local school committees.

7. Welcome to the Profession Events

The Committee reviewed the guidelines for the Welcome to the Profession events at the schools, with particular emphasis on funding. Presently, CDA sponsorship is \$500.00 per school, an amount which has been in place for approximately ten years.

It is noted that schools with large registrations have difficulty maintaining this budget, although it is recognized that in some cases, the provincial associations co-sponsor the event.

However, it appears that funding is satisfactory in the majority of cases, because of varying formats. Some schools combine the "Welcome" with another major school function, such as the Dean's night/awards ceremony, or limit attendance to first and second year students.

After considering a per capita sponsorship for this function, the Committee decided not to request a change in the funding policy at this time, but rather to ask for special budget consideration for schools experiencing difficulty in meeting costs, and also to consider alternate formats.

In organizing this event, student reps will attempt to arrange classroom time or time apart from the reception, for a CDA speaker to address the first year, and possibly the fourth year, classes.

8. Canadian Fund for Dental Education

Student representatives continue to raise the profile of the Canadian Fund for Dental Education at their respective schools. Members expressed appreciation to the CFDE for sponsoring the Students' Conference again this year, and will communicate this to their local CFDE representatives, where possible.

It is also their aim to have a CFDE representative attend the Welcome to the Profession receptions, if such a representative is available in or close to the dental school. If not, it was suggested a faculty member could be asked to speak on behalf of the CFDE

9. **Next Meeting of the CSA**

In accordance with the new format of the Committee, the next meeting of the CSA will be held on September 12, 1993, with fourth year student representatives attending. Items pertaining to senior dental students and new grads will be the main topics of this meeting.

10. **CDA Practice Management Program**

The Committee was given an overview of CDA's new Practice Management Program including the pilot seminar held recently at the University of British Columbia. Members also had an opportunity to review Volume One of the resource materials for this Program.

In discussing the merits of the Program, the Committee feels that timing for the seminar is of utmost importance, so that graduating students will have the opportunity to attend the seminar before schedules escalate prior to graduation when their main focus is on practising.

The Committee commends the CDA for developing this program, and enthusiastically supports its efforts in this area.

11. **CDA/Dentsply Student Clinic Program**

The Committee noted the change in schedule for the 1993 CDA/Dentsply Student Clinic Program, from the CDA national convention timeframe to the CDA Board in September. Members expressed their appreciation of the support for this program from Dentsply International and the Canadian Dental Association.

12. **CDSC'94**

The 1994 CDA/CFDE Canadian Dental Students' Conference will be held in Ottawa at CDA Headquarters on June 4-5th.

13. **Closing**

On behalf of the CDA Committee on Student Affairs, I would like to thank the Canadian Dental Association for its continued support of Canadian dental students and their endeavours, through the expertise and guidance of Dr. Richard Sandilands, as the Executive Council Liaison to the CSA.

I would like to thank CDA staff members, Ms. Linda Teteruck and Mrs. Win Mobley for their ongoing support and encouragement.

Respectfully submitted,

Dr. Mahnaz Fatahzadeh
Chairman
Committee on Student Affairs

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Committee on Student Affairs as information.

**Current Student Views on Funding
for Mandatory NDEB Examination**

A CDA Committee on Student Affairs Position Paper

Mandatory NDEB testing of graduates from Canadian dental schools will begin in 1994, requiring each candidate to write a 300-question multiple choice examination. A practical examination, called the OSCE (Objective Structured Clinical Examination) will be tested next year as well. Dental students of Canada have voiced their concerns about the value of mandatory testing for licensure, and feel that this new requirement is redundant and unnecessary.

Canadian dental students realize the complex issues at work in this present situation and wish to take this opportunity to outline their concerns with the proposed structure and funding of these NDEB exams. In 1993, Canadian dental graduates were required to pay \$490.00 to obtain their NDEB certificate. At this point in time, it is our understanding that 1994 graduates will write the NDEB written examination (300 M.C.Q.) and that the OSCE examination will be tested. There will be no direct cost to graduating students in 1994 for this additional testing. However, a tentative estimate of \$700.00 has been placed on this examination process, bringing the total cost of NDEB certification to approximately \$1200.00, when and if, it becomes mandatory. Students unanimously agree that this additional fee would impose yet another financial burden at a time when cash flow problems are at their greatest, and adding to this the cost of licensing fees, insurance, in many cases relocation expenses, and the reduced demand for dental manpower in urban areas. Furthermore, most dental students leave school with a sizeable debt. According to Dr. R.E. McDermott of the University of Saskatchewan, College of Dentistry, over half of the 1993 dental graduates will convocate with a total debt of at least \$45,000.00. It becomes evident that additional fees for NDEB testing will provide further financial hardship.

Possibly, mandatory NDEB testing may bring uniformity to the licensing process in all provinces in Canada. If all ten provinces can accept the NDEB examination for licensure, it would allow national portability of dentists. If such complete portability cannot be guaranteed by the new system, there is yet another reason to question its introduction. Canadian dentists should have greater accessibility to jobs anywhere in Canada. The introduction of testing will also provide some visible reassurance that Canadian dental school graduates are adequately trained to provide safe and prudent dental care - as the product, not the process, will be tested.

Although there have been no demonstrated problems with the current system of licensure based on certification of graduates of accredited programs, testing will provide the licensing boards with the visible assurance they are seeking. Therefore, it is appropriate that the cost of these examinations be shared by the licensing bodies, through licensing fees. A 2% increase (approximately \$20.00) extended to licensed dentists would cover the cost of administration of the examination. If the licensing bodies agree that mandatory testing of Canadian graduates is the ultimate requirement, the responsibility of sponsoring the examination should rest with them. Canadian dental students, in accepting the policy of further examination, feel that since the profession as a whole will undoubtedly benefit from this new policy, funding should be co-operative as well.

Canadian dental students look to both the various provincial dental boards and to the profession for support. As evidenced by the high enrolment at all schools in CDA student membership, dental students keenly desire to be an integral part of the profession in Canada. It is our hope that in this time of decision, the Canadian Dental Association and its corporate members will continue their longstanding support of dental students by considering student concerns in this issue, thus providing new graduates with the incentive to continue the affiliation they have carried through dental school, to practice life.

Respectfully submitted,

Dr. Marco Chiarot
CDA Student Governor

Staff/Student Relations: Building the Trust**A CDA Committee on Student Affairs Position Paper**

The dental profession has progressed significantly in the last number of years. Unfortunately, dental education has not maintained this pace. Although some improvements have been made, several shortcomings still exist with frightening similarity in the vast majority of the ten dental faculties in Canada. Many of these problems are identical to those facing the dental students of a generation ago. Those former students are the dentists and dental educators of today. It is their responsibility to the profession to stop history from repeating itself.

While each faculty has its own peculiar issues, only the problems common across the country will be addressed in this position paper. It would be possible to simply list these concerns, but it is the specific goal of this paper to offer tangible solutions to many of the problems facing Canadian dental students. The CDA Committee on Student Affairs (CSA) has addressed many of these issues before, but staff/student relations continue to be one of the most serious concerns of dental students in Canada today.

One fundamental problem is the general fear of reprisal which confronts students who wish to voice legitimate concerns about staff or curricula. Students who are currently in dental schools have achieved this goal due to their intelligence, drive and ability to express their thoughts. It is reasonable to believe that many of these students have valuable ideas that would make positive contributions to dental education. In this light, it is somewhat alarming that across the country, students feel that speaking freely often causes negative retribution. Whether this feeling is real or perceived, it is present and common. In many faculties, Staff/Student Relations or Grievance Committees exist for the purpose of allowing students to voice their concerns. In theory, these committees offer a direct solution for addressing student issues. In practice, however, the committees are often ineffective: many of the concerns are not sent back to the staff involved; barriers are created which make it difficult to solve specific problems (for example, individual staff members cannot be named); or, due to the perceived power of the faculty members on the committee, students still feel apprehensive about repercussions.

These committees must be completely neutral and have specific mandates with safeguards that prevent any personal reprisal from issues brought up during the meetings. The faculty members that sit on the committees must be powerful enough to affect change, but removed from direct grading so as to ensure impartiality. Only the students can choose such faculty members. On the other hand, the students that sit on the committees must be forthcoming

enough to address all issues. They must realize that they are representing other students, and that the faculty on the committees are indeed there to help. In short, a foundation of trust should be created by these committees, which can serve to provide the basis for more trust throughout the staff and student population.

Some of the student concerns are in regard to demonstrators on the clinic floor. One recurring theme involves clinical instructors berating students in the company of their patients. This experience is humiliating and provides no benefit for either the student or the patient. The student often loses confidence in his or her abilities and invariably, the patients begin to question the competence of the student providing their treatment. This problem is easily avoided by the instructor simply taking the student aside. Furthermore, such conflicts are unbefitting to the profession, especially to students who will be colleagues within a few short years. Under no circumstances should this insensitive and unprofessional behaviour by the demonstrator be tolerated. Dental faculties should have specific measures in place in order to deal with proven incidences of such misconduct.

Another issue which deals specifically with clinical instructors is the variability of techniques between instructors on the clinic floor. In the preclinical laboratory, teaching of a single technique is beneficial to the learning process as the goal of reaching a certain ideal is stressed to neophytes of the profession. Once the foundation has been made in the lab, however, variety of technique in the clinic is a valuable and positive experience. Students should be open to learning different methods of performing one procedure. Likewise, the demonstrators should be open to the inquiries of the student. It is vitally important that the instructors be equipped to provide insight into why their method is more practical than another. They should be aware that the student is not questioning their authority or ability, but is instead making an effort to cultivate and develop his or her dental knowledge. Such interactive teaching modalities are beneficial to both the student and the demonstrator. Moreover, failure to question methodology results in graduation of poorly educated automatons and creates an obvious breakdown in the education process.

Instructor variability also exists in terms of grading practices. It is the understanding of the CSA that educators are working through workshops at the Association of Canadian Faculties of Dentistry (ACFD) towards consolidation of grades. The students of Canada encourage any method that will increase standardization of grades. One method involves all clinical instructors within one department attending a mandatory workshop at the beginning of each school year. This workshop would provide the opportunity to show photographs and/or models of work done by previous students. The instructors would individually grade the work. Any discrepancies in the assigned grades would be discussed until consistency could be reached among all instructors.

Unfortunately, sexual inequality is still an issue in the dental schools of today. Several accounts exist of both chauvinism against female students by some male instructors or favouring of female students by other male instructors. It is obvious that favouritism and discrimination of any type is intolerable and must be dealt with severely. Such occurrences should be brought up individually with the instructor involved or investigated by a legitimate staff/student liaison committee.

Students are also concerned about didactic and curricular issues. Many lecture hours are spent on topics already covered in other courses. It is the responsibility of the institution to utilize the four year (five in Saskatchewan) program most efficiently. This is simply not possible if lectures are being repeated in multiple courses. If every department co-ordinated their lecture material, this problem could be avoided. Dalhousie University has made significant progress in this area by co-ordinating their entire program.

Curriculum changes are another common source of conflict between staff and students. Hasty changes in the curriculum while the students are already immersed in the program are truly frustrating, especially when no consultation with students has taken place. Every effort should be taken to make changes to the curriculum effective for the incoming first year class only. In this way, fewer errors and oversights will occur and current students will feel less subject to hurried change. At some faculties, the committees responsible for curriculum changes do not include a single student. Who better knows the strengths and weaknesses of a program than a student who has just been through it? Inclusion of one or more students on such committees should be compulsory; thereby aiding in the free flow of information between staff and students and the continual improvement of the dental curriculum.

Despite the tone of much of this paper, the quality of education in Canadian faculties is of the highest level and therein provides a stimulating, challenging atmosphere for learning the art and science of dentistry. Many outstanding professors offer invaluable insight in a constructive and respectful manner. These professors should be rewarded for their excellence. Teaching awards are given on a separate basis by each faculty, but perhaps national recognition would be more suitable for these remarkable individuals. A national award based on teaching skills with clear criteria would promote excellence in teaching.

One method of identifying these exceptional educators is through student evaluation of faculty members. While it is true that some form of evaluation is done by the students of every faculty, they are often cursory in nature and the information gleaned from their results is often disregarded. These forms should be standardized and mandatory for all frequent lecturers and clinical

instructors. If the students are then willing to take these evaluations seriously, and spend the time and effort necessary to properly complete them, then these evaluations should be useful as a component in decisions of promotion and/or tenure. The students would appreciate feedback on these evaluations. This would not be used as a method of obstructing the education process, but instead as an incentive for improvement to professors who continually get poor evaluations, and as recognition of the more prominent educators. Once again, increased involvement in the education process will continue to build the trust between faculty and students.

It is evident that the root of many of the problems between dental students and their professors stems from the lack of trust that currently exists. The realities of dental education today create an environment whereby students have their work constantly scrutinized by their instructors. This situation leads to the potential of many conflicts between personalities, ideas, and philosophies, as well as an erosion of trust. The CSA is aware that some dental students find fault in every situation whereas others are simply indifferent. Many of these students feel distant from the education system and therefore do not concentrate their efforts on improving it. This perception must be changed by both the students and the educators. Students must begin to play a more active role and believe more in the intent of their institutions. Educators, on the other hand, must realize that their students are thoughtful and intelligent, and must be treated as such. They must allow the students to play active roles in their learning. Both the students and instructors share the common goal of providing a positive, learning-intensive atmosphere and graduating dentists who continue to uphold the highest level of care in the world. All of the concerns outlined above have relatively simple solutions. If faculty and students co-operate, dental education, and thus the dental profession will continue to improve.

On behalf of the CDA Committee on Student Affairs,

Kevin L. Davis
Student Governor-Elect

June, 1993

TAXATION COMMITTEE

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

- Members:** Dr. Robert N. Hicks, Chairman, Vancouver
Dr. Elizabeth MacSween, Ottawa
Dr. Bryun Sigfstead, Edmonton
- Executive Liaison:** Dr. Barry Dolman, Montreal
- Senior Staff:** Mrs. Sandra Davis, Manager - Executive Services
- Coordinator:** Ms. Martyne S. Giroux

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

The following issues are requiring ongoing involvement of the Taxation Committee:

1. **U.I.C. Contributions/Benefits Related to Spouses Employed in Dental Practices**

The Taxation Committee Chair met with Mr. Ray Cuthbert of the Canada Pension Plan/Unemployment Insurance Programs Section - Source Deductions Division to obtain information regarding the eligibility of spouses working in their husband's/wife's dental practice to participate in the unemployment insurance program.

Mr. Cuthbert has provided CDA with a copy of a November 18, 1991 amendment to the Unemployment Insurance Act in which Section 3(2)(c) states the following:

- 2) Excepted (excluded) employment (in the Unemployment Act) is:
- c) employment where the employer and the employee are not dealing with each other at arm's length and, for the purposes of this paragraph,
 - ii) where the employer is, related to the employee, they shall be deemed to deal with each other at arm's length if the Minister of Revenue is satisfied that, having regard to all the circumstances of the employment, including the remuneration paid, the terms and conditions, the nature and importance of the work performed, it is reasonable to conclude that they would have entered into a substantially similar contract of employment if they had been dealing with each other at arm's length.

Section 3(2)(c) of the Unemployment Insurance Act, in effect, is saying that if a spouse works as an employee for her employer husband (wife) and the conditions of work and the remuneration paid is similar to that which the employer would pay to an arm's length employee under the same conditions, the spouse is eligible for the Unemployment Insurance Program.

If any employee is working for a related employer and the wage is excessive relative to hours of work and/or the content of work that the employee performs, the employee may be classified as excluded from insurable employment by virtue of paragraph 3(2)(c) of the Unemployment Insurance Act. In addition, the same related employee may not be a bonafide employee in the eyes of Revenue Canada Taxation and thereby the employee's wages/benefits would not be deductible expenses in calculating the employer's business income for the purposes of taxation.

Both cases reported in the Taxation Committee's report to the 1993 Interim CDA Board of Governor's Meeting are in the Appeal process. The case where the dentist employed his wife for an average of 25 hours/week at \$22/hour does not appear to demonstrate excessive wages. The Appeal decision should be received prior to the Annual Meeting of the CDA Board of Governors. The decision and the reasons for the decision in the \$22/hour employee case will have a strong influence on the recommendations of the Taxation Committee as to how dental practices should proceed on this issue.

When the information is available from both of these appeals, the Taxation Committee, with the approval of the Board of Governors or the Executive Council, will develop an information bulletin that will provide guidelines for dental employers who hire related employees.

2. **Dental Associates/Dental Hygienists Classified as Employees by Revenue Canada**

Following the initial report on this issue in the Committee's report to the 1993 Interim CDA Board of Governor's Meeting, the Chair of the Taxation Committee met with a tax lawyer, Ms. Barbara Worndl of Aird and Berlis in Toronto, and with senior officials in Revenue Canada Taxation - Audit Directorate in Ottawa.

Ms. Worndl works in the area of employee-independent contractor classifications and has recently put together a large presentation to Revenue Canada supporting the independent contractor status for a large group of individuals who have historically been self-employed but are now being classified as employees. During the meeting, Ms. Worndl generously shared information that came from her recent research on this topic and she also provided significant case law reports that related to dental associates/dental hygienists, employee/independent contractor status. There was no fee related to this exploratory meeting.

The Taxation Committee subsequently engaged Ms. Worndl to provide, in a written report, for a modest fee, a sequence of case law that would relate to dental associates/dental hygienists and that would work toward substantiating the independent contractor status for these two groups. The Committee also requested that Ms. Worndl list the criteria that she feels supports independent contractor status and the criteria that supports an employee status.

This issue is a very important issue to dental practices. If dental associates are classified as employees, the employer is required to submit federal income tax, CPP premiums, U.I.C. premiums plus the employer's CPP/UIC premiums. In Ontario, the employer is also responsible for the Employer Health Tax. If a dental associate working as an independent contractor is classified as an employee, the employer may be deemed to have failed to withhold source deductions. Failure to do so results in a penalty of 10% of the amount that should have been withheld plus interest.

A discussion with senior officials in Revenue Canada Taxation - Audit Directorate has occurred and there is no overt campaign to classify dental associates or dental hygienists as employees. Certain auditors have independently classified dental associates as employees. The Taxation Committee is recommending that further legal opinion be considered, on a modest budget, on what key criteria are necessary to maintain an independent contractor status. It is evident in case law that the existence of a contract identifying the independent contractor status of the dental associate is important but there must be additional evidence that the primary dentist and the dental associate act within the criteria of an independent contract status.

Once the information on this subject is adequate there are two methods to communicate the recommendations to the dental profession. Guidelines can be developed that will assist lawyers in drafting individual agreements. The guidelines could be developed with a modest budget since the Chair of the Taxation Committee would write the guidelines and have them reviewed by Revenue Canada and by tax lawyers. The second method would be to develop a "generic agreement" for dental associates. This agreement would need to be developed in concert with tax lawyers and therefore would involve a larger budget, i.e. up to \$15,000. However, a "generic dental associate agreement" would be of considerable value to members of the profession.

Prior to the Board of Governors Annual Meeting, the Committee will cost out both methods for the Board's consideration.

3. **GST Update**

- 1) On February 11, 1993, Bill C-112 GST Legislation was presented in the House of Commons. Bill C-112 offered amendments to the Excise Tax Act that relate to the GST.

One of the amendments will permit removal of the GST on the sale of inventory when a dental practice is sold/purchased. The application of the removal of GST on inventory when the practice is sold is complex and only applies under certain circumstances, i.e.

- a) when the vendor and the purchaser are registrants under GST;
- b) when the vendor and the purchaser are not registrants under GST;
- c) when the vendor is not registered and the purchaser is registered under GST.

Unfortunately, when the vendor is registered under GST but the purchaser is not registered, GST must apply to the inventory during the sale of a practice.

A technical bulletin will be prepared by the Taxation Committee to update the previous bulletin on GST and the Sale of a Dental Practice.

- 2) Revenue Canada has informed the CDA Taxation Committee that they want to review the calculation of input credits. This was announced in a Notice of Ways and Means Motion in the April 1993 federal budget. Amendments were made to clarify the requirements to apportion GST paid on indirect inputs for registrants who make both taxable and exempt supplies of goods and services.

A future meeting with officials from Revenue Canada - GST will take place with the CDA Taxation Committee in the late summer or early Fall. Preliminary discussions did not identify any serious changes to the GST and Dentistry Manual.

Respectfully submitted,

Robert N. Hicks, D.D.S., M.S.
Chairman, Taxation Committee

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Taxation Committee as information.

Executive Council is highly appreciative of the work of Dr. Hicks, and has directed that a designated CDA staff person attend meetings to ensure continuity and succession of Committee activities, which are of major importance to the membership.

THIRD PARTY DENTAL PLANS COMMITTEE

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Luc Dugal, Chairman, Calgary
Dr. David Anderson, Windsor
Dr. Alf Dean, New Waterford
Dr. David Tobias, Vancouver

Executive Liaison: Dr. Bernie White, Saskatoon

Coordinator: Ms. Susan Matheson

1. Committee Meetings

The Third Party Dental Plans Committee has met once since the report to the 1993 Interim Meeting: May 22-23, 1993.

ITEMS REQUIRING BOARD ACTION

2. Guidelines For Code Revisions

APPENDIX I

In 1992, the CDA Board of Governors requested the Third Party Committee to establish guidelines for code revisions and/or changes. The Committee documented the process for the code changes and they were circulated to the Provincial/Corporate bodies for comment. Each of the nine provinces using the Uniform System of Codes and List of Services (USCLS) indicated their support for the acceptance of the Guidelines.

RESOLVED:

93.56 **THAT the Guidelines for Code Revisions and/or Changes outlined in Appendix I be accepted.**

ADOPTED

3. Uniform System of Codes and List of Services

APPENDIX II

The Third Party Committee continues to dialogue with the Provincial Committees and Speciality Committees in order to address future changes required to the USCLS.

As an ongoing revision to the USCLS, the Committee submits the 1993 changes and/or additions to the USCLS for Board approval and implementation in 1994.

RESOLVED:

- 93.57 **THAT the revisions to the USCLS as outlined in Appendix II be accepted and implemented on January 1, 1994.**

ADOPTED**ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION**4. Joint CDA Third Party Committee/Provincial Meeting

The Third Party Committee initiated the concept of holding a "national forum" that would allow an opportunity for provincial members to send a representative to one CDA Third Party Meeting to discuss issues of mutual concern. The Shared Concerns Conference provided this forum in past years. Given the need to increase communication, the provinces were surveyed to identify if they would fund a member of their Provincial Economics or Third Party Dental Plans Committee to attend a CDA Third Party Dental Plans Committee (3rd Party Committee) Meeting in 1993. The response has been positive and the Third Party Committee has suggested the date of October 30, 1993 in Ottawa. This approach allows an opportunity for the provinces to meet and discuss dental insurance related issues in conjunction with a regularly scheduled CDA Third Party Meeting.

At the May meeting, the Committee prepared the meeting agenda and it will be circulated to the provinces. The Committee has identified, the role of the USCLS, Revisions to Prophylaxis Codes, Fee Guide, Fraud/Abuse, Alternate Payment Systems, as areas for discussion. The Committee will be requesting the provinces to send members of their 3rd Party/Dental Practice Advisory Committee (DPAC) as

well as well as an Economics Committee member. It is hoped that a wide participation will provide a forum for open discussion of issues. The Committee will update that Board at the next meeting regarding the outcome of the Conference.

5. Proposed Prophylaxis Code Changes

At the May meeting, the Committee reviewed the comments relating to the proposed splitting of the Prophylaxis code. It was apparent that consensus could not be reached. Therefore, the Committee decided to delay the request and discuss the proposed changes with the provincial members at the October Conference.

6. Purchaser Information Program

The direction of the Purchaser Information Program (PIP) is involved with the dissemination of information through orders received from across Canada for the Direct Reimbursement Kit and telephone request for information. Due to budget restrictions, no aggressive activities can be implemented. However, requests for information continue to be handled by the CDA PIP office.

7. Closing Comments by Chairman

I would like to thank the Committee members and CDA staff, Susan Matheson and Pat Duminy for their continued assistance and support.

Respectfully submitted,

Luc Dugal, D.M.D., Chairman
Third Party Dental Plans Committee

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Third Party Dental Plans Committee.

GUIDELINES FOR CODE REVISIONS AND/OR CHANGES

Requests for new codes, code revisions and/or changes are accepted from the CDA Third Party Committee, the Corporate Bodies and National Speciality Organizations recognized by the CDA.

The following charts outline the mechanism that will be utilized by the Third Party Committee to review a code request.

NEW PROCEDURE CODES

Definition:

A procedure code that is presently not included in the USCLS.

A. From the Committee

A request for a new procedure code that has been identified by the Committee and falls within the standards of the USCLS, will be circulated to the Corporate Bodies/National Speciality Groups for comment and response. The responses will be reviewed by the Committee and a request, based upon responses, will be submitted to the CDA Board of Governors for approval.

B. From National Speciality Groups/Corporate Bodies

A request will be submitted in writing, supported by documentation, to the CDA for review. The Third Party Committee will identify if there is already a procedure code in the guide which would cover this request. If a code exists, a response identifying this code will be forwarded to the specific group making the request.

If a code does not exist, the Committee will determine if the request falls within the standards of the USCLS. If yes, the code request will be included in the Third Party report to the CDA Board of Governors for ratification. If the code does not fall within the USCLS standards, it will be circulated to the provinces and speciality groups for comment. The comments will be reviewed by the Committee and the request will be included in the Third Party report to the CDA Board of Governors.

REVISIONS

Definition:

A revision is defined as a description change to an existing code; an addition of an L or E to a code; or a re-organization of an existing code; or a change to the USCLS standards.

A. From the Committee

Requests for revisions that have been identified by the Committee and falls within the standards of the USCLS, will be circulated to the Corporate Bodies/National Speciality Groups for comment and response. The responses will be reviewed by the Committee and a request, based upon responses, will be submitted to the CDA Board of Governors for approval.

B. From National National Speciality Groups/Corporate Bodies

Requests for revisions will be submitted in writing, supported by documentation, to the CDA for review. The Committee will determine if the request is a revision to the USCLS standards or is a code description revision. If yes to either, the request will be circulated to the Corporate Bodies and Speciality Groups for comment. The comments will be reviewed by the Committee and the request will be included in the Third Party report to the CDA Board of Governors.

EDITING

Definition:

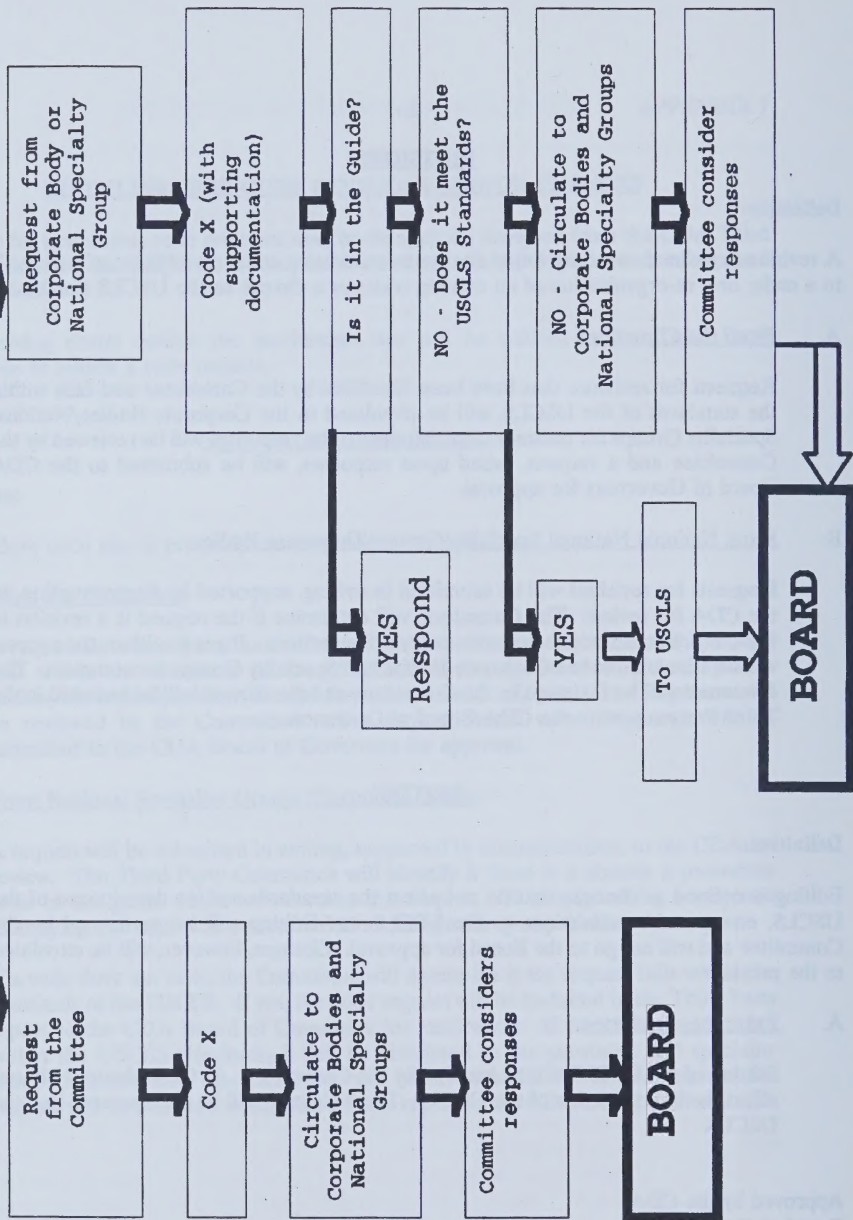
Editing is defined as changes that do not affect the standards and/or descriptions of the USCLS, errors and/or omissions to the USCLS etc. Editing will be performed by the Committee and will not go to the Board for approval. Changes, however, will be circulated to the provinces.

A. From the committee

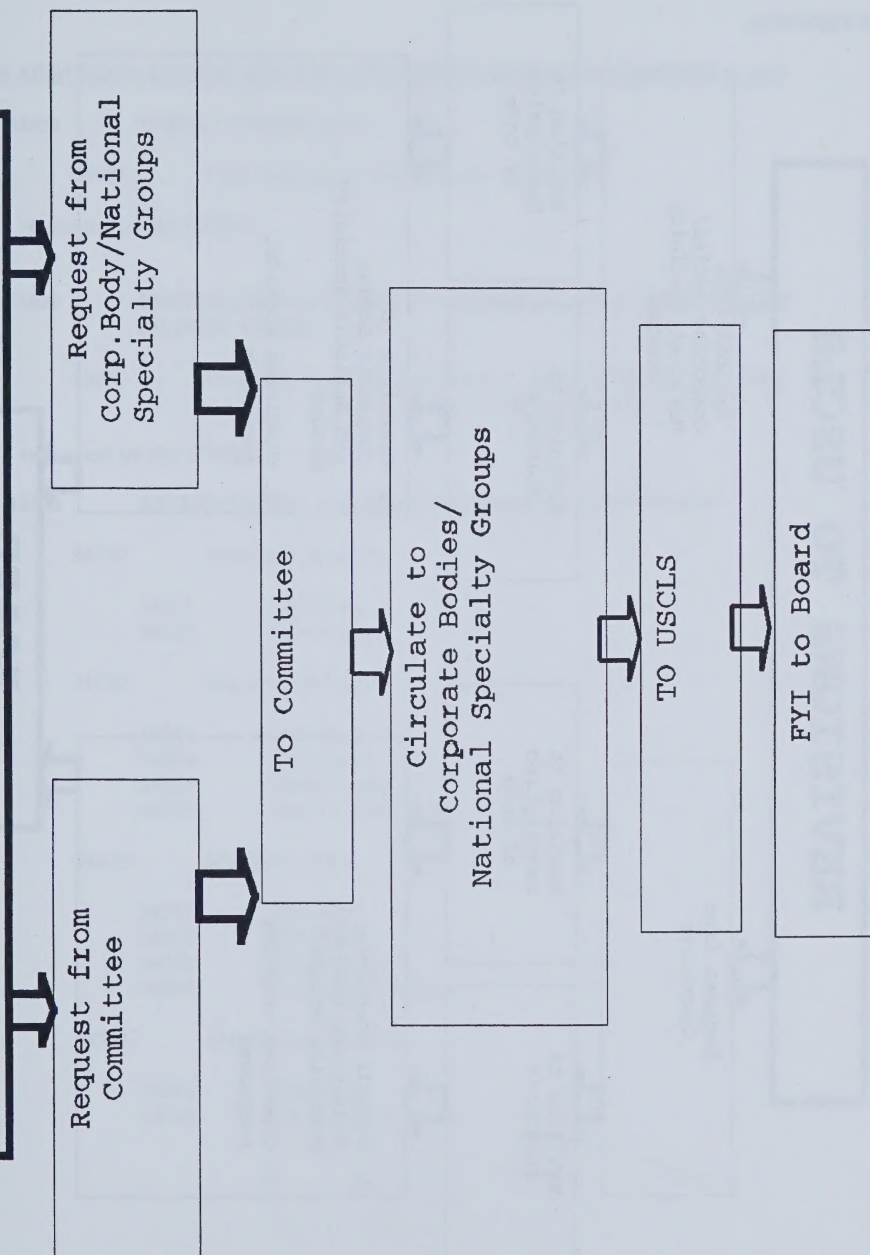
Editing of the USCLS will be handled by the Committee. As these changes will not affect the interpretation of the USCLS. These changes will be incorporated into the USCLS.

Approved by the CDA
Board of Governors
September, 1993

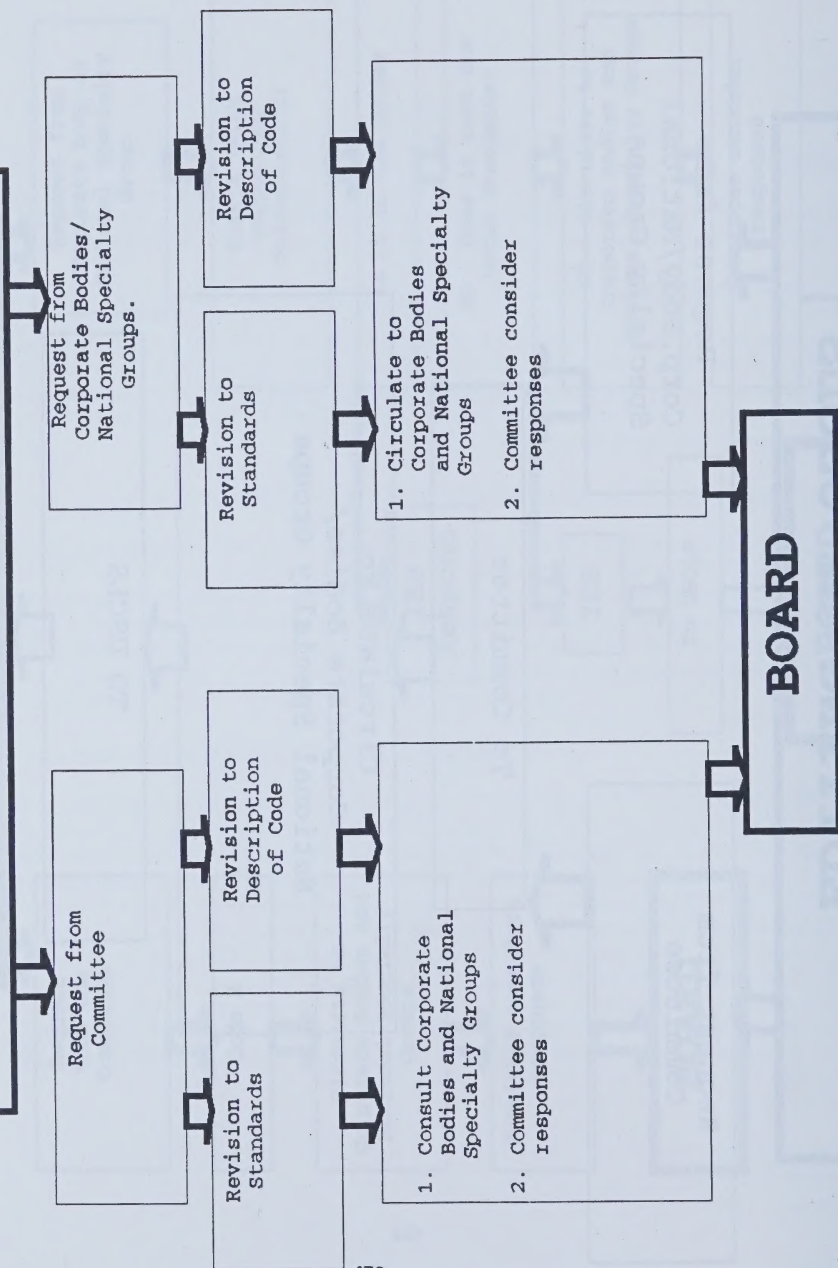
NEW PROCEDURE CODES



EDITING OF USCLS



REVISIONS TO USCLS



USCLS ADDITIONS AND/OR CHANGES FOR IMPLEMENTATION JANUARY 1, 1994**NEW 04400 TESTS, CYTOLOGICAL**

04402 Vital Staining of Oral Mucosal Tissues +E

- requested by the CDSBC

NEW 23600 RESTORATIONS, TOOTH COLOURED/PLASTIC WITH SILVER FILINGS, CORES23602 Restorations, Tooth Coloured, Acid Etch/Bonded, Core,
in conjunction with crown

- requested by the CDSBC

NEW 34300 RETREATMENT, APICOECTOMY/APICAL CURETTAGE

34310 Maxillary Anterior

34311 One Root

34312 Two Roots

34320 Maxillary Bicuspid

34321 One Root

34322 Two Roots

34323 Three Roots

34324 Four or more Roots

34330 Maxillary Molar

34331 One Root

34332 Two Roots

34333 Three Roots

34334 Four or more Roots

34340 Mandibular Anterior

34341 One Root

34342 Two or more Roots

- 1 -

34350 Mandibular Bicuspid

- 34351 One Root
- 34352 Two Roots
- 34353 Three Roots
- 34354 Four or more Roots

34360 Mandibular Molar

- 34361 One Root
- 34362 Two Roots
- 34363 Three Roots
- 34364 Four or more Roots

- requested by the Canadian Academy of Endodontics

CHANGE

39400

**EXPLORATORY ACCESS THROUGH CLINICAL CROWN OF
PREVIOUSLY TREATED TOOTH**

39410 Exploratory Access

- 39411 Anterior
- 39412 Bicuspid
- 39413 Molar

- requested by the Canadian Academy of Endodontics

CHANGE/NEW

41200

ORAL DISEASE, MANAGEMENT OF

41210 Oral Manifestations, Oral Mucosal Disorders

- 41211 One unit of time
- 41212 Two units of time
- 41213 Three units of time
- 41214 Four units of time
- 41219 Each additional unit over four

41220 Nervous and Muscular Disorders

- 41221 One unit of time
- 41222 Two units of time
- 41223 Three units of time
- 41224 Four units of time
- 41229 Each additional unit over four

41230 Oral Manifestations of Systemic Disease

- 41231 One unit of time
- 41232 Two units of time
- 41233 Three units of time
- 41234 Four units of time*
- 41239 Each additional unit over four

- requested by the CDSBC



MEMORANDUM

July 06, 1993

CANADIAN
DENTAL
ASSOCIATION
L'ASSOCIATION
DENTAIRE
CANADIENNE

OFFICE
OF THE
PRESIDENT
CABINET
DU
PRÉSIDENT

TO: CDA Board of Governors
FROM: Bernard Dolansky, President
SUBJECT: WORKING GROUP ON MEMBERSHIP

The Executive Council has recommended that the minutes of the first meeting of the Working Group on Membership be included in this Board book as a preliminary report from the Working Group. Also enclosed is some of the background material that the Committee considered.

The Committee discussions were interesting and far-ranging. These discussions could have a significant implication for CDA's financial future. What programs should we offer at the national level? Who should pay for these programs? On what basis do we devise a fee? How can the cost of providing national services be equitably borne by the entire profession? How do we reach consensus on these issues?

The next meeting of the Working Group will probably determine if workable answers can be found to these questions. As part of this process, your input to these discussions would be of great assistance to the Working Group. Please review the concepts in the minutes of the Working Group meeting, with a view to offering your comments and direction at the CDA Board of Governors Annual Meeting. Your input and guidance are greatly appreciated.

MEETING OF THE WORKING GROUP ON MEMBERSHIP

MAY 21, 1993

BOARDROOM, CDA HEADQUARTERS

- Present:** Dr. Bryun Sigfstead, Chairman, Edmonton, Alberta
Dr. David Somer, Hamilton, Ontario
Dr. George Peacock, Saskatoon, Saskatchewan
Dr. Paul Castonguay, Grand Sault, New Brunswick
Dr. Robert Salois, Sherbrooke, Québec
Dr. Garry Lunn, Vancouver, British Columbia
- Staff:** Mr. Bill Grogan, CDA Consultant
Mrs. Sylvie McPartlin, Secretary, Member Services
Mr. Joel Neal, Director of Administration
Mrs. Carol Anne St. Laurent, Manager, Member Services
Ms. Linda Teteruck, Director of Communications

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1. Call to Order and Welcome

Dr. Sigfstead called the meeting to order at 10:00 a.m. in the Boardroom of CDA headquarters. He welcomed the members to the first meeting of the Working Group on Membership, congratulated them on accepting the appointment to the Group and complimented them on their dedication to CDA. Dr. Sigfstead reminded the committee members that throughout the discussions held today, members should reflect on CDA's mission, member needs, public responsibility and stewardship of the profession as set by the mission.

Although each member represents and may be privy to specific provincial concerns, a national focus is the objective. Keeping in mind the members' regional contexts, the Working Group's raison d'être is to develop together recommendations that will result in a greater sense of fairness in apportioning the financial cost of the many programs and services which CDA provides. Members were asked to be open in expressing any new ideas to the Group. Dr. Sigfstead asked members to review the Working Group's Terms of Reference:

1. Review and assess the CDA membership status in each province, and the relationship of the provincial association to government and to the CDA;

2. Develop plans and strategies for those provinces that are currently mandatory, to remain mandatory;
3. Develop plans and strategies for those province that are mandatory, should that status become threatened;
4. Explore how those provinces that are voluntary can possibly become mandatory in their requirement for CDA membership;
5. Review CDA's fee structure for individual dentists, corporate members and licensing bodies, and explore ways for CDA to broaden its financial base.

Dr. Sigfstead then asked Bill Grogan to serve as discussion facilitator for the session.

2. Meeting Process

Mr. Grogan recommended to the Group a process by which the meeting might proceed. He first asked that the members check back with their individual regions and forward to CDA any additional information they deem important and wish to add to the resource book.

Mr. Grogan mentioned that there is potential for differing opinions between CDA and provincial associations. It was said that the objective for this session would be to get things out in the open, discuss the issues and, at the same time, consider CDA's future.

On the subject of reporting relationships, members agreed that this Working Group would report directly to CDA's Executive Council. Any recommendations emanating from the first meeting would be referred to the Executive Council for reporting to the September Board of Governors meeting. Any firm recommendations developed by the Working Group would be circulated to the corporate members through Executive Council for full discussion by the provinces prior to Board submission.

Because of the wide-ranging Terms of Reference of the Working Group, members concluded that the Group would be required to meet over a longer period of time than originally anticipated. A Report in Progress would be given to the CDA's Executive Council meeting in June for review by the Board in September. Since some of the suggestions from this meeting may have financial implications, it was suggested that Executive Council might wish to refer them to the Planning Session this Fall.

3. Terms of Reference

Mr. Grogan suggested to the members that the "Terms of Reference" be considered to be not in any order of priority as per discussions held at the CDA Board of Governors' meeting on May 1, 1993. All are of equal importance for the Group's consideration. The Terms of Reference can be tackled in the order deemed most appropriate by the Group. It was agreed that items 1 and 2 should be addressed at the beginning of discussion since they included the validation of information for future decision making.

4. Possible Fee Payment Model

APPENDIX I

Mr. Joel Neal, CDA's Director of Administration, was invited to present a model of fee payments.

He referred to a chart developed by staff based on an idea conceived by Dr. Bernie White and discussed at CDA's 1992 Fall Planning Session. The chart divided CDA's expenditures into three categories: Governance, Professional Services and Member Services. Mr. Neal noted that the division was similar to CDA's existing financial statements where expenses are grouped as Executive Services, Professional Services, Member Services and Administration.

In the fee payment chart, administration expenses were apportioned to the three categories based on a rather subjective analysis of manpower. That is, staff were asked to account for their time and allocate it by project area. Based on the staff time per project area as a percentage of total staff time, administration costs were apportioned accordingly. Mr. Neal acknowledged the subjective and time sensitive aspects of this method noting that time spent in various project areas may change over the course of a year. He explained there were other methods considered but each had its faults.

He also explained that the rationale for grouping the various project areas by the headings Governance, Professional Services and Member Services. Basically, Governance included those project areas or functions related to running the business side of the Association including such things as the Board of Governors and the Council on Constitution and By Laws. Professional Services included those project areas or programs dealing with the practice of dentistry such as Dental Material and Devices and Accreditation. Likewise, the Member Services group of project areas included those functions more related to dental practice management such as Taxation and Dental Awareness.

Some areas were split and costs allocated between two divisions. These included CDAnet and the Convention. It was acknowledged that other areas perhaps should be divided between two groups rather than being completely in one. An example was the Journal.

Accepting that there may be questions on the division and allocation of expense items, attention was turned to the apportionment of revenues. It was noted that there were programs where specific revenue was generated and this income had been netted against the appropriate expense category. This left membership income: membership fees, corporate fees and licensing body grants. As noted on the chart, the membership fee income was attributed to membership services, the licensing body grants to professional services, and corporate fees to the governance function. The chart also showed the numbers of individuals to whom the various fees were charged or who paid the fees as the case may be. The chart showed the simple logic that the more people to shoulder the cost, the less the cost per individual.

In concluding his presentation, Mr. Neal commented that the chart was not a proposition but simply a tool to show the apparent disparity between who benefits from what activities and who is currently paying for them. He invited comments and questions, and asked that members review the allocation of expense by project area and propose any changes they might recommend.

To facilitate this review, he agreed to forward a package of information listing the project areas and the programs managed within them to each member. Upon receipt of their comments, a new, updated chart would be developed for presentation at the next meeting.

Dr. Peacock also asked that some thought be given to the descriptive titles, most specifically professional services. The term "professional" may be interpreted by some to mean services provided by members of the profession and by others to mean services related to the practice of dentistry. He asked that alternatives be considered.

5. CDA Fees

Members reviewed the different types of fees which CDA collects.

Dr. Peacock informed the group that, as is the case in most mandatory provinces, Saskatchewan doesn't list members fees on their invoice to their constituents due to provincial laws. As a result, dentists know they are members of the CDA, however, they do not know the cost.

It was also mentioned that CDA's membership fee which is now \$410.00 increases every year to allow CDA's programs and projects to be maintained. At the present time, 70% of the dentists in Canada remit membership fees. If every dentist in Canada belonged to the Association, the member fee could be significantly reduced to approximately \$310.00 per dentist. This would still permit CDA to maintain its full complement of programs and make the financial contribution by individual dentists, especially New Graduates more manageable.

Dr. Salois also recommended that as the CDA is negotiating with the provincial licensing boards regarding a fee increase that CDA keep in mind that individual licensing board members may not be able to justify the current fee. CDA must develop a mechanism to explain and justify the licensing fee at whatever price it is.

6. Membership Categories

After breaking for lunch, the members returned to discuss the concerns or suggestions they have regarding the manner in which CDA can inspire a "soul" connection with members and prospective members.

Dr. Somer explained the different membership categories which are now offered to dentists in Ontario. In order for them to recruit and keep the new graduates, the Ontario Dental Association offers new graduates a reduced fee. For the first year, after graduation, they pay 1/4 of the annual fee; for the second year, 1/2 of the annual fee; for the 3rd year, 3/4 of the annual fee and only during their 4th year do they pay the full amount.

Dr. Somer feels that CDA should consider introducing a membership category for new or recent graduates.

Dr. Castonguay mentioned that the New Brunswick Dental Society also offers its new graduates a special rate for the first year whereby they pay 1/2 of the annual fee. They must, however, still pay the full fee for the Canadian Dental Association. It was suggested that CDA reconsider its current fee structure for new grads and offer a reduced fee. Mr. Neal was asked to provide members with the revenue implications of doing this and with this information the Working Group will discuss it at its next meeting.

7. Member Services

Members were asked to express how CDA should differ between members and non-members when merchandising, when distributing the CDA Journal, and when delivering other services of CDA.

Dr. Castonguay mentioned that dentists in New Brunswick felt concern that Ontario and Québec dentists who are non-members receive most of the services that membership entitles CDA members to receive.

It was also mentioned that while widely available services such as the car rental and hotel rate discounts were good, CDA members were more interested in exclusive-to-CDA services which would be of benefit professionally as well as financially.

Dr. Somer mentioned that most importantly, CDA has to be able to serve the dentists on a national level and that competition between the CDA and any Provincial Association is not in the best interest of organized dentistry. Car rentals and other services may appeal to some dentists, but the main advantage of joining CDA is the national voice it provides the profession. This is the image CDA should be communicating to the membership.

These challenges were suggested as priority agenda items for the next meeting. How can the complete organized dentistry machine work more efficiently for the individual member? Is CDA providing services required from a national organization?

8. Speaker Tours

Members expressed a common concern that information on CDA and its activities is not being transmitted "down to the grass roots".

It was strongly felt that the Board of Governors' duties should extend beyond the two Board meetings held yearly. If CDA needs to be more visible to the rest of the country, members of the Board of Governors should be asked to represent CDA by speaking on its behalf at their local society meetings.

To assist in promoting CDA at the Society level, we could develop a CDA pin. This pin would be presented by the visiting CDA Governor to the Society President. CDA staff could assist in this task by developing a speech and slide presentation and possibly a CDA video or handout material, if funds allow, that Governors could use on their travels.

A training session could be held for Governors during the time of the Board meeting to equip them with the services and tools needed to effectively present CDA's programs and activities to local societies.

The members recognized that this activity could be quite costly and suggested that CDA consider redistribution of its resources so that a greater priority was

placed on carrying the message to membership. In order to achieve this, the CDA could look to dollars assigned to the governance function.

It was also suggested that the speakers could visit neighbouring provinces. This would appear to make the spokesperson more widely committed to the Association. However, it was noted that high costs could be associated with this proposition.

A report of the unanimous positive sentiment attached to this Speakers' Tour concept will be made by the Working Group Chairman to the next Executive Council meeting.

9. Public Relations

Dr. Salois expressed that most dentists do not have sufficient time to read the promotional material developed by CDA. Therefore, money being spent on certain mailings perhaps could be better spent on advertising, public service announcements, videos, etc.

It was also suggested that CDA address dental health issues directly to the public to make dentistry more visible. Programs such as cancer awareness and sports safety were mentioned as examples. This would make dentists proud to be a part of their national association. Therefore, it was suggested that more money be spent on public awareness and public relations work.

Another suggestion was for CDA to concentrate on educating the Canadian public in the member provinces instead of spending as much money on the function of governance.

10. Provincial Acts

Members discussed existing and changing Provincial Acts.

Dr. Lunn mentioned that in British Columbia, the dental hygienists were going to have their own Act and therefore the College of Dental Surgeons of British Columbia would no longer have responsibilities regarding hygienists.

Consideration is being given by two of the auxiliary associations in Saskatchewan to pursue their own individual legislation, such being separate from that pertaining to the dentists.

Dr. Somer mentioned that the College of Dental Surgeons of Ontario was revising the Act.

Dr. Salois mentioned that in Québec, regulations regarding discipline are changing. He noted that only 5% of complaints received went to the Discipline Board. Soon the other 95% would be reviewed by a separate panel which will include dentists and non-dentists. Therefore, the cost associated with discipline will increase over the period. Increasing expenses at the provincial level may render a licensing fee increase very unlikely at this time.

Dr. Salois agreed to forward to CDA, a copy of Québec's Dental Act and Provincial Association By-Laws.

It was agreed that should any changes occur, that the members will forward to CDA a copy of their new Act.

11. Preparation for the Next Meeting

In keeping with the Terms of Reference and expanding on the deliberations of this session, members were asked to develop and send to Carol Anne St. Laurent, a maximum of 12 possible recommendations for future discussion. These will be consolidated and distributed to all members. The agenda, for the next meeting will be developed by consensus from this consolidated list. Mr. Grogan thanked the members for their cooperation and openness.

12. Next Meeting and Adjournment

The next meeting of the Working Group on Membership was tentatively scheduled for Sunday, September 12, 1993. Dr. Sigfstead thanked the members for their participation.

The meeting was adjourned at 4:45 p.m..

FILING OF REPORT

The Board of Governors receives with appreciation the interim report of the Working Group on Membership as information.

Proposed Fee Payment Formula

	Governance	Professional	Member	Total
Direct Expenses	\$545,500	\$340,800	\$1,508,000	\$2,387,100
Admin. Costs	549,800	694,500	1,649,400	2,893,700
Sub-Total	<u>\$1,095,300</u>	<u>\$1,035,300</u>	<u>\$3,157,400</u>	<u>\$5,288,000</u>
Less: Non Dues Income	<u>0</u>	<u>416,600</u>	<u>1,196,100</u>	<u>1,612,700</u>
Total	<u>\$1,095,300</u>	<u>\$618,700</u>	<u>\$1,961,300</u>	<u>\$3,675,300</u>
Members	10,715	14,317	8,677	
Membership Fee	\$102	\$43	\$226	\$371
Current Fee	\$12	\$20	\$410	\$442

Based on 1992 Membership Fee rates and draft financial statements.

Note:

COUNCIL ON CONSTITUTION AND BY-LAWS

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Members: Dr. Mac Balfour, Oakville - Chairman
Dr. John Silver, Vancouver
Dr. Lynn Stone, Edmonton
Dr. Gerald Turner, Glace Bay
Dr. George H. Peacock, Consultant, Saskatoon

Executive Liaison: Dr. John Diggins, Vancouver

Senior Staff: Mrs. Sandra Davis

Coordinator: Ms. Martyne S. Giroux

1. Council Meetings

One meeting of Council has taken place since the 1993 Interim Meeting of the Board of Governors. This meeting, utilizing a conference call was held on May 17, 1993.

ITEMS REQUIRING BOARD ACTION

The items requiring consideration of the Board included those referred from the decisions taken during the 1993 Interim Meeting.

2. Roles and Responsibilities of the Management Committee

93.25 "THAT the following be added to the Roles and Responsibilities of the Management Committee:

Shall have the authority to act on behalf of the Executive Council between meetings of Council when necessary, and shall report and be accountable for all actions at the next meeting of Executive Council".

ADOPTED

The Council discussed the advisability of a 14 day reporting timeframe which is consistent with other areas in the By-Laws. The Council believes that the final reporting responsibility should remain with the Executive Council to the Board of Governors.

RESOLVED:

- 93.58** **THAT Article XI - Officers and Officials, Section 7 - Roles and Responsibilities of the Management Committee be approved, as amended.**

APPENDIX I

ADOPTED

3. Gender Neutrality

Resolution of the 1993 Interim Meeting:

- 93.33** **THAT the Constitution and By-Laws be amended to reflect gender neutrality.**

ADOPTED

RESOLVED:

- 93.59** **THAT the Constitution and By-Laws be amended as appended, to reflect gender neutrality.**

APPENDIX II

ADOPTED

4. Eligibility of the Immediate Past-President - Housekeeping

- a) Article VIII - Board of Governors
Section 2 - Elections or Appointments (f) - Eligibility of the Immediate Past-President

In order to achieve consistency, the Council recommends that Article VIII - Board of Governors, Section 2 -Elections or Appointments (f) should be amended to reflect the term of office of the Immediate Past-President as found in Article XI - Officers and Officials, Section 5 - Roles and Responsibilities of the Immediate Past-President.

RESOLVED:

- 93.60** **THAT Article VIII - Board of Governors, Section 2 - Elections or Appointments (f), be approved as amended.**

APPENDIX III

ADOPTED

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

5. Council would like to express thanks to Mrs. Sandra Davis and Ms. Martyne Giroux for their assistance.

Respectfully submitted,

Mac Balfour, Chairman
Council on Constitution and By-Laws

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Council on Constitution and By-Laws.

CURRENT

ARTICLE XI - OFFICERS AND OFFICIALS

Section 7 - Roles and Responsibilities of the Management Committee

The Management Committee shall be a committee of the Executive Council and consist of four members, the Immediate Past-President, the President, the Vice-President, and the President-Elect who shall be the chairperson:

- (a) shall assure that all money securities, deeds and real property belonging to the Association are properly secured and accounted for.
- (b) shall provide advice to Executive Council on the Association's affairs.
- (c) shall perform such other duties as may be designated by the Executive Council or these By-Laws.
- (d) shall keep a Minute Book and report to the Executive Council.
- (e) shall review all budgets and financial statements presented by the President-Elect for the forthcoming year and the auditor's report prior to presentation to the Executive Council and Board of Governors.

PROPOSED

ARTICLE XI - OFFICERS AND OFFICIALSSection 7 - Roles and Responsibilities of the Management Committee

The Management Committee shall be a committee of the Executive Council and consist of four members, the Immediate Past-President, the President, the Vice-President, and the President-Elect who shall be the chairperson:

- (a) shall assure that all money securities, deeds and real property belonging to the Association are properly secured and accounted for.
- (b) shall provide advice to Executive Council on the Association's affairs.
- (c) shall act on behalf of the Executive Council establishing interim policies when the Executive Council is not in session and where such action in the discretion of Management Committee is essential to the management of the Association, provided that such action must be reported to Executive Council within fourteen (14) days and presented by Executive Council at the next following session of the Board of Governors.
- (d) shall perform such other duties as may be designated by the Executive Council or these By-Laws.
- (e) shall keep a Minute Book and report to the Executive Council.
- (f) shall review all budgets and financial statements presented by the President-Elect for the forthcoming year and the auditor's report prior to presentation to the Executive Council and Board of Governors.

CURRENT

CANADIAN DENTAL ASSOCIATION

L'ASSOCIATION DENTAIRE CANADIENNE

BY-LAW NO. 1

A By-law relating generally to the transaction of the business and affairs of the Canadian Dental Association, l'Association dentaire canadienne.

Be it enacted and it is hereby enacted as a By-law of the Canadian Dental Association, l'Association dentaire canadienne (hereinafter called the "Association") as follows:

ARTICLE I

NAME

The name of the Association shall be the Canadian Dental Association and in French, l'Association dentaire canadienne.

ARTICLE II

HEAD OFFICE

The head office of the Association shall be in the Regional Municipality of Ottawa-Carleton, in the Province of Ontario and at such place therein as the Board of Governors may from time to time determine.

ARTICLE III

SEAL

The seal, an impression whereof is stamped in the margin hereof, shall be the corporate seal of the Association.

PROPOSED

CANADIAN DENTAL ASSOCIATION

L'ASSOCIATION DENTAIRE CANADIENNE

BY-LAW NO. 1

A By-law relating generally to the transaction of the business and affairs of the Canadian Dental Association, l'Association dentaire canadienne.

Number and Gender: Except where the context otherwise requires, words importing the singular number only shall include the plural and vice versa and words importing a specific gender shall include the other genders.

Be it enacted and it is hereby enacted as a By-law of the Canadian Dental Association, l'Association dentaire canadienne (hereinafter called the "Association") as follows:

ARTICLE I

NAME

The name of the Association shall be the Canadian Dental Association and in French, l'Association dentaire canadienne.

ARTICLE II

HEAD OFFICE

The head office of the Association shall be in the Regional Municipality of Ottawa-Carleton, in the Province of Ontario and at such place therein as the Board of Governors may from time to time determine.

ARTICLE III

SEAL

The seal, an impression whereof is stamped in the margin hereof, shall be the corporate seal of the Association.

CURRENT

ARTICLE VIII - BOARD OF GOVERNORS

Section 2 - Elections or Appointments

- (f) No member of the Association shall be eligible to be a voting member of the Board of Governors for more than three consecutive terms of two years, unless he is elected to the office of Vice-President in which case he shall automatically remain on the Board of Governors for three additional years from the time he becomes Vice-President.

PROPOSED

ARTICLE VIII - BOARD OF GOVERNORS

Section 2 - Elections or Appointments

- (f) No members of the Association shall be eligible to be a voting member of the Board of Governors for more than three consecutive terms of two years, unless he is elected to the office of Vice-President, in which case he shall automatically remain on the Board of Governors **until the completion of his term as immediate Past-President as provided for under Article XI, Section 5.**

COUNCIL ON EDUCATION

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

- Members:** Dr. Gordon Thompson, Chairman, Edmonton
Dr. Robert Baker, Winnipeg
Dr. Donald Bonang, Halifax
Dr. Marcia Boyd, Vancouver
Dr. Joel Epstein, Vancouver
Dr. Helen Lyttle, Winnipeg
Dr. James Main, Toronto
Ms. Susanne Sunell, Vancouver
Ms. Maureen Symmes, Edmonton
Dr. Richard Taché, Montréal
Ms. Donna Wells, Toronto
- Executive Liaison:** Dr. James Brookfield, Kirkland Lake
- Observers:** Dr. Gérald Albert, President, Association of Canadian Faculties of Dentistry, Montreal
Mrs. Danuta Askew, Coordinator, CDA Dental Admissions Committee, Ottawa
Dr. Ralph Barolet, Dean, Faculty of Dentistry, McGill University, Montreal
Dr. Ralph Brooke, Chairman, Commission on Dental Accreditation of Canada, London
L. Col. Gilbert Grenier, Canadian Forces Dental Service School, Ottawa
Mrs. Lorraine Emmerson, Executive Secretary/Treasurer, Association of Canadian Faculties of Dentistry, Ottawa
Dr. Gundega Kravis, Executive Director/Registrar, National Dental Examining Board of Canada, Ottawa
Dr. Guy Maranda, President, Royal College of Dentists of Canada, Sainte-Foy
Dr. Clifford Miller, Associate Director, Education, American Dental Association, Chicago
Mr. Greg Mitton, Chairman Elect, CDA Committee on Student Affairs, Halifax
Dr. Roland Vallée, Dean, Faculty of Dentistry, Laval University, Sainte-Foy
- Staff:** Mr. Brian Henderson, Director, Professional Services/Education and Accreditation
Ms. Susan Matheson, Associate Director, Education and Accreditation
Dr. Arthur Schwartz, Associate Director, Professional Services
Ms. Gay MacQuarrie, Coordinator, Education and Accreditation

1. Council Meeting

The Council on Education met in Ottawa on June 7, 1993. The meeting was a public meeting with many observers present who, in some cases, reported on their respective organization's activities. Observers were invited to openly participate in the meeting.

It should be noted that the name of Dr. Ralph Brooke, Chairman of the Commission on Dental Accreditation of Canada, was inadvertently omitted from the list of Observers in the Council's 1992 report to the Annual Meeting - CDA Board of Governors.

ITEMS REQUIRING BOARD ACTION**2. Terms of Reference, Nominating Committee**

In order to be considered for membership on the Committee, an individual would already have to have served on the Council for one year. Therefore, if the individual's membership on the Council was renewed after two years (Council membership is three years, once renewable) for a second, three-year term, then their membership on the Committee would, in fact, have been for only five years, not six years.

RESOLVED:**APPENDIX I**

93.61 **THAT the Terms of Reference for Committee membership on the Nominating Committee of the Council on Education be changed to read "two years, once renewable".**

ADOPTED**3. Terms of Reference, Council on Education**

Originally, terms of reference for Council stated that the Association of Canadian Faculties of Dentistry (ACFD) was the organization formally representing allied dental educators. The CDHA and the CDAA expressed concern that they should be involved in the nomination process. Last year, the terms were altered to permit the Canadian Dental Assistants' and Canadian Dental Hygienists' Associations to nominate the allied dental educators on Council. It is now felt that this change does not recognize the role of the ACFD in the cooperative process that is actually being used. Council wishes to reflect in the formal terms of reference for the Council the joint involvement of both groups.

RESOLVED:**APPENDIX II**

- 93.62** **THAT the following be added to points 4) and 5) of the Terms of Reference for the Council on Education: "... in consultation with the Association of Canadian Faculties of Dentistry's Allied Dental Educators Committee."**

ADOPTED**RESOLVED:**

- 93.63** **THAT the Council on Constitution and By-Laws prepare the necessary By-Law amendments.**

ADOPTED

4. Professional Resource Utilization

Council noted that the current economic climate is such that dental schools must justify their continued funding. Concern was expressed that provincial governments were considering all possible means of reducing educational funding, possibly including closure of smaller schools and identification of recognized schools to meet the needs of two or more provinces. It was felt that the profession should have statistical information available on which the profession can present its arguments for the numbers of dentists to be trained and/or where training opportunities should be available. To this end, Council passed a motion that the Council on Education supports the philosophy of continuing opportunity for quality undergraduate and graduate and post-graduate education for Canadians to undertake the study of dentistry in Canada.

RESOLVED:

- 93.64** **THAT the Canadian Dental Association supports the principle that there should be continuing opportunity for quality undergraduate and graduate and post-graduate dental education for Canadians, within Canada.**

ADOPTED

5. "Dentistry: Is It for You?" Pamphlet

The Dental Aptitude Test examination kit includes the pamphlet "Dentistry: Is It for You?" as a resource for candidates. The pamphlet was recently revised and approved by the Board. To this point, it has been available only in English, and there are many requests for French language copies.

RESOLVED:

93.65 **THAT** the pamphlet "Dentistry: Is It for You?" be produced in French.

ADOPTED

6. Family Violence Initiative, Health and Welfare Canada

Health and Welfare Canada has requested CDA's support in recognizing the importance of an awareness of family violence issues and that health care educators, preparing future practitioners, be aware of the issues, recognize needs at an early stage, and be able to deal effectively with family violence-related concerns at the individual, family, and community level.

RESOLVED:

93.66 **THAT** the Canadian Dental Association recognizes the need to increase the awareness level of graduate dentists, dental hygienists, and dental assistants regarding the issues relating to family violence;

THAT dental and allied dental education programs be encouraged to provide opportunities for future health care providers to become more aware of issues related to family violence; and

THAT these statements be distributed to all accredited dental education programs, accredited hospital dental services, and the Program Development Committee of the Association of Canadian Faculties of Dentistry.

ADOPTED

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION**7. Other Organizations' Reports**

In addition to the report from the Canadian Fund for Dental Education (Item 8), Council accepted with interest reports from the following organizations:

Association of Canadian Faculties of Dentistry
Canadian Dental Assistants Association
Canadian Dental Hygienists Association
Committee on Student Affairs
Federation of Registrars of Dental Licensing Authorities of Canada (new body)
National Cancer Institute of Canada.
National Dental Examining Board of Canada
Royal College of Dentists of Canada

8. Canadian Fund for Dental Education (CFDE)

Council learned of CDA's proposal to form one umbrella organization – the Dentistry Canada Fund – to administer the five dentistry funds. There was concern that the mandate of CFDE and its successful relationship with the educational community be preserved. Council has received assurances to that effect, but would appreciate an opportunity to review the terms of reference for the new Dentistry Canada Fund and the operation of CFDE within the new structure. Information on the structure and mandate of the new Dentistry Canada Fund and the operation of the fund will be circulated to the Council on Education.

9. Accreditation

In view of the fact that the National Dental Examining Board of Canada (NDEB) will be instituting a national written examination beginning with the class of 1994, Council passed a motion to reaffirm its support of the accreditation process which includes the outcomes assessment or CORE - Clinical Outcomes Review and Evaluation.

10. Continuing Education Committee

Council was made aware of a decision to temporarily suspend funding for activities of the Continuing Education Committee based, in part, on financial considerations as well as the view that there is some overlap with continuing education activities at the CDA Annual Meeting. The Chairman of the Committee expects to conduct committee business by telephone or mail in the coming year.

11. **Dental Admissions Committee**

Council passed a motion confirming soap as the carving material to be used for the manual dexterity portion of the Dental Aptitude Test. Soap had been substituted for chalk as the carving material on a pilot program basis and has proven to be an excellent substitution.

12. **Nomination Method**

Calls for nominations to committees of Council will take the form of a letter and, in the case of the Dental Admissions Committee, will be sent to the deans of the faculties of dentistry. In the case of the Continuing Education Committee, calls for nominations will be sent to deans of the faculties of dentistry, the licensing authorities, and the provincial corporate bodies.

13. **Dental Internships in Ontario Hospitals**

Council learned of the Ontario Ministry of Health's intention to stop funding hospital dental internships places in 1994/95. Dr. Ralph Brooke, Chairman of the Commission on Dental Accreditation of Canada, and Dr. James Main of the University of Toronto met with Ministry officials and presented information supporting continuation of the residency positions. Dr. Brooke acknowledged, with thanks, the strong support of the Ontario Dental Association in helping to clarify the issues and to convince the Ministry of the need for continued funding. Dr. Brooke will be meeting again this summer with Ministry officials. Discussion at this meeting will also include a proposed reduction of teaching and research funds by 80 percent.

14. **Procedure for Consideration of a New or Revised Specialty Definition**

At the request of Council, a document has been prepared outlining steps to be followed by Council in reviewing submissions for consideration of a new or revised specialty definition. The draft document has been based upon a comparable document adopted by the American Dental Association.

The document was approved in principle for use in review of an anticipated submission from Oral Medicine. It will be circulated to communities of interest for review and comment with a view to submission for approval at the 1994 Interim Board meeting.

15. McGill University, Faculty of Dentistry

Council learned that a selection process is underway for a new dean of the faculty. The appointment is expected to commence September 1st, 1993 as Dr. Barolet completes his term as dean in October 1993. (See Item 23.)

16. 1992 CFDE/CDA Teaching Conference

APPENDIX III

A report from the Conference Chairman, Dr. Norman Levine, was provided to Council for information.

17. 1993 CFDE/CDA Teaching Conference

The date of 1993 CFDE/CDA Teaching Conference on Hospital Dentistry is October 15 and 16 in Toronto. The goal of the conference is to identify the educational role of hospital dentistry and to evaluate hospital dentistry in Canada. The format of the conference will be a forum for comprehensive discussion of hospital dentistry via formal lectures and panel discussions or focus groups. The tentative agenda includes: role of hospital dentistry in undergraduate, postgraduate, and research training; career opportunities; service commitments; accreditation standards; and administrative and financial support as they apply to hospital dentistry.

18. 1994 CFDE/CDA Teaching Conference

Dental Clinical Decision-Making and Epidemiology is the topic approved for the 1994 CFDE/CDA Teaching Conference to be held in Toronto. Dr. D. W. Lewis of the University of Toronto will be the Conference Chairman.

19. 1995 CFDE/CDA Teaching Conference

At its June 1993 annual meeting, the Association of Canadian Faculties of Dentistry will consider a proposal from Dr. David Donaldson (Vancouver) for the possible conference topic of "clinic administration in dental faculties."

20. AIDS/HIV Education and Prevention

The Association of Universities and Colleges of Canada asked the Canadian Dental Association to endorse and lend its name to a joint statement from Canada's post secondary education community on campus-based health promotion to prevent AIDS/HIV. Council felt that dental schools are currently actively involved in AIDS awareness programs and that the proposed statement required further work.

21. Continuing Education Recognition Programs

Council was informed of the Academy of General Dentistry's (AGD) four-year approval of CDA's application for recognition of continuing education programs under the AGD point system. Council also learned of the American Dental Association's recent implementation of a new continuing education recognition program.

22. North American Free Trade Agreement

A letter dated May 14, 1993 from the Presidents of the Canadian Dental Association and American Dental Association to the President of the Mexican Dental Association (*Asociacion Dental Mexicana*) was circulated to Council for information.

23. Recognition of Individuals' Contribution to Dentistry

Council recognized the contributions to dentistry made by Dr. Ralph Barolet, Dean of the Faculty of Dentistry; Dr. Gundega Kravis, Registrar and Executive Director of the National Dental Examining Board of Canada; and Drs. Ian Bennett, Marcia Boyd, and Gordon Thompson who worked for many years on the Dental Aptitude Test Committee (now the Dental Admissions Committee).

Respectfully submitted,

Gordon Thompson, Chairman
Council on Education

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Council on Education.

**EXISTING
TERMS OF REFERENCE**

APPENDIX I

**NOMINATING COMMITTEE
of the
COUNCIL ON EDUCATION**

MEMBERSHIP

The Nominating Committee shall consist of three members plus the Director of Education and Accreditation, who shall act as staff support and secretary to the Committee. In appointing the membership of the Committee, the Chairman of the Council on Education will ensure that representation is constituted as follows:

- (1) The Chairman of the Council on Education shall be the nominated as the Chairman of the Nominating Committee
- (2) Two persons from the Council on Education
- (3) The Director of Education and Accreditation as Secretary

The Chairman of the Nominating Committee shall be appointed annually by the President of the Association on the recommendation of Executive Council.

Membership on the Nominating Committee shall be staggered, for a term of three years, once renewable.

DUTIES

It shall be the duty of the Nominating Committee to:

- i) Solicit and maintain a roster of names and qualifications of individuals for possible membership on committees of the Council and to advise Council with respect to possible Chairpersons of standing committees of Council.
- ii) Prepare a list of all elective positions to be filled, excluding those for the Nominating Committee, and submit this list sixty (60) days before the annual meeting of the Council on Education.
- iii) Submit an annual report, listing eligible nominees for each open elective position sixty (60) days prior to the annual meeting of the Council on Education. The annual report is to be included with other committee reports for advance distribution prior to the annual meeting.
- iv) Conduct such other nominating tasks as the Council on Education may direct from time to time.

Approved by the Board of Governors
Canadian Dental Association
May 1993

**PROPOSED
TERMS OF REFERENCE**

**NOMINATING COMMITTEE
of the
COUNCIL ON EDUCATION**

MEMBERSHIP

The Nominating Committee shall consist of three members plus the Director of Education and Accreditation, who shall act as staff support and secretary to the Committee. In appointing the membership of the Committee, the Chairman of the Council on Education will ensure that representation is constituted as follows:

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- (2) Two persons from the Council on Education
- (3) The Director of Education and Accreditation as Secretary

The Chairman of the Nominating Committee shall be appointed annually by the President of the Association on the recommendation of Executive Council.

Membership on the Nominating Committee shall be staggered, for a term of two years, once renewable.

DUTIES

It shall be the duty of the Nominating Committee to:

- i) Solicit and maintain a roster of names and qualifications of individuals for possible membership on committees of the Council and to advise Council with respect to possible Chairpersons of standing committees of Council.
- ii) Prepare a list of all elective positions to be filled, excluding those for the Nominating Committee, and submit this list sixty (60) days before the annual meeting of the Council on Education.
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- iv) Conduct such other nominating tasks as the Council on Education may direct from time to time.

**EXISTING
TERMS OF REFERENCE**

APPENDIX II

COUNCIL ON EDUCATION

The Council on Education shall consist of eleven members. In electing the membership of the Council, the Board of Governors will ensure that representation is constituted as follows:

- (1) One person nominated by the Canadian Dental Association.
- (2) One person who is active in Hospital and/or Institutional Dentistry nominated by the Canadian Dental Association.
- (3) Three persons from nominations by the Association of Canadian Faculties of Dentistry.
- (4) One person, being a dental hygienist and a member of the Association of Canadian Faculties of Dentistry's Allied Dental Educators Committee nominated by the Canadian Dental Hygienist's Association.
- (5) One person, being a dental assistant and a member of the Association of Canadian Faculties of Dentistry's Allied Dental Educators Committee nominated by the Canadian Dental Assistant's Association.
- (6) One person from nominations by the National Dental Examining Board of Canada.
- (7) One person from nominations of the Provincial Dental Licensing Authorities.
- (8) One person from nominations by the Royal College of Dentists of Canada.
- (9) One Consumer/Public representative who is the representative on the Commission on Dental Accreditation of Canada.

The Chairman of the Commission on Dental Accreditation of Canada shall sit as an observer to the Council on Education.

A representative of the American Dental Association's Council on Education shall sit as an observer to the Council.

The annual meeting of the Council on Education shall be an open meeting to representatives of organizations and/or other interested parties to include the Canadian Forces Dental Services and Deans of Canadian Dental Schools.

The President of the Canadian Dental Association on recommendation of the Executive Council shall annually appoint a member of Executive Council who shall act as the Executive Liaison.

The Chairman of the Council on Education shall be a member of the Council and appointed annually by the President of the Canadian Dental Association on the recommendation of Executive Council.

CURRENT (cont'd)
TERMS OF REFERENCE
COUNCIL ON EDUCATION

page 2

The Chairman of Committees of the Council on Education shall be appointed annually by the President of the Canadian Dental Association on recommendation of Executive Council and in consultation with the Chair of the Council on Education.

Election to Council shall be for a term of three years, staggered, once renewable. No person shall hold more than one position on the Council on Education.

The Council on Education may recommend to the Executive Council the appointment of consultants or advisors and make recommendations as well on resources required to support its initiatives. Budgets supporting this Council shall be subject to the approval of the Canadian Dental Association's Board of Governors. Expenditures of funds within budget shall be the responsibility of the Director of Education and Accreditation.

It shall be the duty of the Council on Education to:

- i) Study matters relating to dental, dental specialty and allied dental education.
- ii) Develop positions and make recommendations to the Canadian Dental Association Board of Governors on issues related to dental, dental specialty and allied dental education.
- iii) Serve through the Canadian Dental Association Board of Governors as a resource assisting corporate members, the National Dental Examining Board of Canada, the Royal College of Dentists of Canada, and/or provincial licensing bodies with respect to dental, dental specialty and allied dental education.
- iv) Study and make recommendations in the field of Continuing Education as it relates to dentistry.
- v) Foster the development of conferences and resources (such as the Annual Teaching Conference and the Dental Aptitude Test) of benefit to dental, dental specialty and dental auxiliary education.
- vi) Advise the Commission on Dental Accreditation of Canada on issues of mutual interest (including accreditation standards and requirements).

The Council on Education shall have the power to appoint committees and sub-committees as approved by the Board of Governors.

Approved by the
CDA Board of Governors
May, 1993

**PROPOSED
TERMS OF REFERENCE**

COUNCIL ON EDUCATION

The Council on Education shall consist of eleven members. In electing the membership of the Council, the Board of Governors will ensure that representation is constituted as follows:

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- (3) Three persons from nominations by the Association of Canadian Faculties of Dentistry.
- (4) One person, being a dental hygienist and a member of the Association of Canadian Faculties of Dentistry's Allied Dental Educators Committee nominated by the Canadian Dental Hygienist's Association in consultation with the Association of Canadian Faculties of Dentistry's Allied Dental Educators Committee.
- (5) One person, being a dental assistant and a member of the Association of Canadian Faculties of Dentistry's Allied Dental Educators Committee nominated by the Canadian Dental Assistant's Association in consultation with the Association of Canadian Faculties of Dentistry's Allied Dental Educators Committee.
- (6) One person from nominations by the National Dental Examining Board of Canada.
- (7) One person from nominations of the Provincial Dental Licensing Authorities.
- (8) One person from nominations by the Royal College of Dentists of Canada.
- (9) One Consumer/Public representative who is the representative on the Commission on Dental Accreditation of Canada.

The Chairman of the Commission on Dental Accreditation of Canada shall sit as an observer to the Council on Education.

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The annual meeting of the Council on Education shall be an open meeting to representatives of organizations and/or other interested parties to include the Canadian Forces Dental Services and Deans of Canadian Dental Schools.

The President of the Canadian Dental Association on recommendation of the Executive Council shall annually appoint a member of Executive Council who shall act as the Executive Liaison.

The Chairman of the Council on Education shall be a member of the Council and appointed annually by the President of the Canadian Dental Association on the recommendation of Executive Council.

PROPOSED (cont'd)
TERMS OF REFERENCE
COUNCIL ON EDUCATION

page 2

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The Council on Education may recommend to the Executive Council the appointment of consultants or advisors and make recommendations as well on resources required to support its initiatives. Budgets supporting this Council shall be subject to the approval of the Canadian Dental Association's Board of Governors. Expenditures of funds within budget shall be the responsibility of the Director of Education and Accreditation.

It shall be the duty of the Council on Education to:

- i) Study matters relating to dental, dental specialty and allied dental education.
- ii) Develop positions and make recommendations to the Canadian Dental Association Board of Governors on issues related to dental, dental specialty and allied dental education.
- iii) Serve through the Canadian Dental Association Board of Governors as a resource assisting corporate members, the National Dental Examining Board of Canada, the Royal College of Dentists of Canada, and/or provincial licensing bodies with respect to dental, dental specialty and allied dental education.
- iv) Study and make recommendations in the field of Continuing Education as it relates to dentistry.
- v) Foster the development of conferences and resources (such as the Annual Teaching Conference and the Dental Aptitude Test) of benefit to dental, dental specialty and allied dental education.
- vi) Advise the Commission on Dental Accreditation of Canada on issues of mutual interest (including accreditation standards and requirements).

The Council on Education shall have the power to appoint committees and sub-committees as approved by the Board of Governors.



Faculty of Dentistry

University of Toronto

APPENDIX III

April 12, 1993

Miss Gay MacQuarrie
Coordinator, Council on Education
Canadian Dental Association
1815 Alta Vista
Ottawa, Ontario
K1G 3Y6

Dear Miss MacQuarrie:

In response to your letter of February 5, 1993, I submit the following information regarding the 36th CFDE/CDA Teaching Conference - Paediatric Dentistry. As you know, we fully intend to produce a complete proceedings of the Conference which is now in preparation, but because of lateness in submission of some of the reports and presented papers, it has been delayed. However, for your forthcoming meeting I do feel a responsibility to submit the information enclosed which includes:

- 1) the list of participants
- 2) the agenda for the three days
- 3) a summary of the proceedings as collated by Dr. Keith Titley
- 4) a statement of accounts as recorded by Jennifer White in Continuing Education

Once again, I wish to thank the CFDE and the CDA for their confidence and support in this programme and for allowing the Department of Paediatric Dentistry, University of Toronto, to host the conference. I have also sent letters of appreciation to Colgate-Palmolive and the Canadian Academy of Paediatric Dentistry for their support.

Should you require any additional information for your meeting, please do not hesitate to call.

Yours sincerely,

Norman Levine
Head, Department of Paediatric Dentistry
Chairman, 36th CFDE/CDA Teaching Conference -
Paediatric Dentistry

encs:

cc: Mr. Brian Henderson, Director, Education and Accreditation, CDA

36TH CFDE/CDA TEACHING CONFERENCE - PAEDIATRIC DENTISTRY SUMMARY OF PROCEEDINGS

ETHICS - DR. A. LYNCH

Dentists have a moral responsibility to ethically treat children. They achieve this by being highly educated, and keep up to date with recent advances through current research and educational material.

They have an obligation to define and get informed consent.

The Province of Ontario's Bill 109 and its implications in treating children were discussed at some length. Delegates from other provinces were extremely interested in its ramifications.

CURRENT CONCEPTS IN EDUCATION - DR. A. ROTHMAN

Dr. Rothman discussed the current trends in education which encompassed the liberalization of higher education, a shift from course content to intellectual process and teaching as an academic activity.

He noted that the trend is now towards problem based learning which requires small groups of students, a multitude of committed teachers and a lot of money. It appears to work well at the pre-clinical level.

University of Toronto has a programme of higher education for faculty who wish to develop a career in teaching and teaching is a factor in promotion and tenure.

FLUORIDE - DR. S. LEVY

Dissertation on fluorosis and fluoride regimens.

It is obvious that F^{I1} is available from many sources and that many patients receive too much. Therefore F^{I1} must be individually tailored to the patients' needs.

Must be careful in prescribing F^{I1} supplements to infants.

GROUPS

WHAT DO WE TEACH

It is evident that there is considerable variation in lecture and seminar hours and clinic time between all the faculties. The end product, however, appears to be the same concern expressed on the competence of our graduates in paediatric dental procedures because of a lack of clinical exposure to some techniques.

From the groups it appears:

- 1) There is some variation in cooperation between the departments of Orthodontics and Paediatric Dentistry, but for the most part it works in the various faculties. This is essential and, although varied, it does work.

- 2) In behaviour management there was a plea that HOME technique be taught only didactically. It is a dated technique that has little or no place in modern paediatric dentistry.
- 3) Discussion on radiological examinations for children - how many films. Decided that we could well follow the guidelines of the American Academy of Paediatric Dentistry, or in brief, individualize the number of radiographs required for a complete diagnosis. No set number for all patients.
- 4) Pulp therapy - The Non Aldehyde Technique from HSC was introduced as an alternative to Formocresol Pulpotomy.

GROUPS' RECOMMENDATIONS - TEACHING

- 1) That there be a free flow of educational material between schools and a central bank of all schools material be established and that each school contribute a new case each year to establish this bank of case material.
- 2) That provision be made for teaching staff to upgrade their teaching skills and that 'teaching' be considered in tenure and promotion.
- 3) We appear stuck at least partially with the lecture/seminar format, the former being a way of transmitting core information and the seminar a way of assimilation and applying it.

TRADITIONAL/NON-TRADITIONAL EDUCATION

This varies among the faculties - generally agreed that these have great value, provided they are adequately supervised and that students can have some hands-on experience. These programmes involve hospitals, selected communities and outreach. The programmes allow students to work more independently than in the traditional faculty-clinic setting. Some programmes are elective and some are required rotations.

Recommend that hospital rotations should include hospitals that provide access to both children and adults and some hands-on experience.

**LIST OF PARTICIPANTS -
36th CFDE/CDA TEACHING CONFERENCE - PAEDIATRIC DENTISTRY
OCTOBER 22-24, 1992**

C.D.A.	-	Dr. Arthur Schwartz
C.F.D.E.	-	T.B.A.
A.C.F.D.	-	T.B.A.
University of Alberta	-	Dr. Hosam ElBadrawy
University of British Columbia	-	Dr. Rosamund Harrison
	-	Dr. Penelope Leggott
Dalhousie University	-	Dr. Ian Bennett
		Dr. Peter Pronych
Laval University	-	Dr. Suzanne Hébert
		Dr. Sylvie Morin
University of Manitoba	-	Dr. Felicity Hardwick
		Dr. Joy Richman
McGill University	-	Dr. Aaron Dudkiewicz
University of Montreal	-	Dr. Leonardo Abelardo
		Dr. Gerald Albert
		Dr. Robert Charland
University of Saskatchewan	-	Dr. Lorne Koroluk
University of Toronto	-	Dr. Paul Andrews
		Dr. Norman Levine
		Dr. Alan Milnes
		Dr. Michael Sigal
		Dr. Keith Titley
University of Western Ontario	-	Dr. Gerald Wright
HOSPITAL REPRESENTATIVES:		
Alberta Children's Hospital, Calgary	-	Dr. Larry Powers
British Columbia Children's Hospital	-	Dr. Gary Derkson
Hospital for Sick Children, Toronto	-	Dr. Michael Casas
		Dr. Douglas Johnston
		Dr. Peter Judd
		Dr. David Kenny
		Dr. Rebecca Yacobi
Izaak Walton Killam Children's Hospital, Halifax	-	Dr. Ross Anderson

**36th CFDE/CDA TEACHING CONFERENCE - PAEDIATRIC DENTISTRY -
OCTOBER 22 - 24, 1992**

DATE	GROUP NO.	TOPIC
Thurs. Oct. 22 P.M.	I	Restorative Dentistry including Pulp Therapy
	II	Behaviour Management
	III	Relationship - Ortho./Paedo.
	IV	Examination and Diagnosis incl. Radiology and Paediatric Pathology
Fri. Oct. 23 A.M.	I	Methods of Course Evaluation
	II	Case Based Learning/Teaching
	III	Lectures and Seminars - Do They Work
	IV	Educational Material (Manuals, Tapes etc.)
Fri. Oct. 23 P.M.	I	Fluorosis Recognition
	II	Fissure Sealants - Use and Abuse
	III	Prophylaxis Before Fluoride - Yes, No, Why.
	IV	Fluoride Supplements
Sat. Oct. 24 A.M.	I	Electives - What Type
	II	Outreach Programmes - At the Expense of Undergraduate Clinics
	III	Community-Based Education
	IV	Dental Care for the Disabled - Of All Ages

GROUP I	GROUP II	GROUP III	GROUP IV
Gerald Albert Ian Bennett Gary Derkson Hosam ElBadrawy Suzanne Hébert Alan Milnes* Rebecca Yacobi	Ross Anderson Paul Andrews Robert Charland Felicity Hardwick Douglas Johnston Norman Levine Gerald Wright*	Aron Dudkiewicz David Kenny Penelope Leggott Sylvie Morin Larry Powers Peter Pronych* Keith Titley	Leobardo Abelardo Michael Casas Rosamund Harrison Peter Judd Lorne Koroluk Joy Richman Michael Sigal*
Room 510	Room 509 (East End)	Room 509 (West End)	Room 500 (Alumni Office)

* Group Leaders

**36thCFDE/CDA TEACHING CONFERENCE
PAEDIATRIC DENTISTRY
OCTOBER 22 - 24, 1992**

THURSDAY OCTOBER 22, 1992		FRIDAY OCTOBER 23, 1992		SATURDAY OCTOBER 24, 1992	
	Chairman - N. Levine Moderator - G. Wright		Chairman - Norman Levine Moderator - Gerald Albert		Chairman - Norman Levine Moderator - Michael Sigal
8.30	Ethics & Patients Rights - Abyann Lynch	8.40-9.45	Current Concepts in Education - Arthur Rothman	8.30	Traditional vs Non-traditional Education
9.45	Question Period	9.45	Question Period	9.45	Discussion Groups (1-4)
10.00	Coffee	10.00	Coffee	10.15	Coffee
10.15	Paediatric Dentistry - Current Programmes - What Do We Teach Now - Ian Bennett and Rosamund Harrison	10.15	Discussion Groups (1-4)	10.30- 11.30	Open Forum - Discussion
11.45	Consensus Report - Felicity Hardwick	11.45	Consensus Report - Gerald Albert	11.30	Consensus Report - Michael Sigal
12.00- 1.00	LUNCH	12.00 - 1.00	LUNCH	12.00 - 1.00	LUNCH
1.00-3.00	Moderator - Ian Bennett Discussion Groups (1-4) - What Should We Be Teaching in Paediatric Dentistry	1.00-2.30	Moderator - Alan Milnes Preventive Dentistry Current Concepts in the use of Fluoride and Fluorosis - Steven Levy	1.00-3.30	Moderator - Keith Tittley Wrap-Up Session Recommendations
3.30-4.45	Open Forum	2.30-2.45	BREAK	3.30	Closing Remarks - Norman Levine
4.30-5.00	Consensus Report - Ian Bennett	2.45-4.30	Discussion Groups (1-4)		
		4.30-5.00	Consensus Report - Alan Milnes		

CFDE/CDA Teaching Conference
October 22-24, 1992

Income:

\$10,000.00
\$ 2,000.00

Total

\$12,000.00

Expenses:

Honorariums:

Dr. Stephen Levy	\$ 575.00
Dr. Arthur Rothman	\$ 500.00
Dr. Abby-Ann Lynch	\$ 500.00
Total Benefits	\$ 41.41

Total \$1,616.41

Chestnut Park Hotel \$6,326.45

Cafe 525 - Lunches & Breaks \$ 768.20

Marriott \$ 478.40

Personal Expenses:

Dr. Bennett	\$ 542.21
Dr. Albert	\$ 511.81
Dr. Levy	\$ 640.76
Dr. Elbadrawy	\$ 624.57
Dr. Harrison	\$ 502.37
Dr. Wright	\$ 198.67
Dr. Koroluk	\$ 385.28

Total \$3,405.67

Total Expenses:

\$12,595.13

Balance of account:

(\$ 595.13)

COUNCIL ON INSURANCE AND INVESTMENT (CDSPI)

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Members: Dr. James R. Brookfield, CDA
Dr. G. Frank Copithorne, British Columbia
Dr. John M. Dillon, Manitoba
Dr. William A. Glave, Ontario
Dr. Ron J. Markey, CDA
Dr. Roy L. Rasmussen, Alberta
Dr. R. Dennis Wells, Ontario
Dr. George S. Zwicker, Nova Scotia

Management Committee: Dr. Rod L. Moran, President
Dr. James N. Wright, Secretary
Dr. Gilles Dubé, Treasurer

Observers: Dr. D. William Allen, Prince Edward Island
Dr. Brian Knoblauch, Saskatchewan
Dr. Robert Sexton, Newfoundland
Dr. Robert A. Turcotte, New Brunswick

1. Council Meetings

The Board of Directors of CDSPI met as the Council on Insurance and Investment of the CDA on April 29 and 30, 1993 in Toronto at the same time as the Interim Board of Governors meeting. The Council is scheduled to meet next on September 12 and 13, 1993 in Ottawa.

ITEMS REQUIRING BOARD ACTION

2. CDIP 1992 National Statistics and Experience

CDSPI Board of Directors reviewed the National 1992 Annual Experience and Statistical report for CDIP plan. The national figures have been provided to the Executive Council, and provincial figures have been sent to each provincial CDIP co-sponsor.

The audits for the financial statements from Imperial Life (the last year for this statement), and Prudential have been completed. As at the time of the writing of this report, the financial statements from Metropolitan have not been received or

audited. As plans at Metropolitan are in a deficit, this does not affect in any way the current financial status of CDIP as reflected by the Prudential statements.

It is the responsibility of CDSPI Board of Directors acting as the Council on Insurance and Investment for the CDA, to review the surplus of the Life, LTD and Office Overhead plans, and make a recommendation for the CDA Executive Council consideration. Because of the pending appeal pertaining to the Life surplus, these financial statements were provided to Fasken Campbell (CDA/CDSPI Legal Counsel) who are handling the appeal process. Fasken Campbell wrote a motion for the Council consideration and it was passed at CDSPI's Board.

RESOLVED:

- 93.67 THAT, even though the 1992 operations of the CDIP Life and Office Overhead plans produced a surplus balance at the year end, in light of the current litigation and appeal in process, no action, distribution or use of any funds should take place until these legal issues are resolved.**

ADOPTED

Note: Refer to Resolution 93.41 contained in the Executive Council report.

Once the legal issues are resolved, under guidance of legal counsel, CDSPI will again review the financial status of each plan, and the CDSPI Board will make a further recommendation at that time.

3. Registered Retirement Income Funds (RRIF's)

A survey conducted by CDSPI in 1991 indicated that the profession had a very strong interest in CDA adding a RRIF program to its retirement benefits. As you are aware, a RRIF is an investment vehicle into which one can transfer retirement funds in order to receive income payments based on a predetermined formula and schedule. It is an alternative to purchasing an annuity.

To respond to this recognized need and interest, CDSPI has been researching and developing a RRIF product. At this time, we are pleased to recommend to the CDA that a RRIF product, which would be administered in tandem with the CDA RSP should be introduced in the Fall of 1993. Having the RRIF product parallel to the CDA RSP, permits a participant in the CDA RSP to move their funds to

a CDA RRIF structure without any loss of investment income due to timing, nor any change in investment strategy due to the fact that the funds can be maintained in a similar type of fund.

In addition, because of such design, administration costs are kept at a minimum and the RRIF is extremely competitive to anything offered on the street. Since the current structure can be used for the RRIF, there is very little additional overhead incurred in order to provide the RRIF vehicle.

RESOLVED:

- 93.68 **THAT, by the Fall of 1993 a CDA RRIF be offered with the same fund investment philosophy in administration structure as that offered by the CDA RSP; eligibility requirements will be the same as those currently used for the CDA RSP product.**

THAT the Executive comment to the above recommendation on RRIF's be amended as follows:

Executive Council agrees, with a proviso that the participant has been a member of the CDA for the past five years. The individual would be allowed a grace period based on payment of fees in arrears. "Dentist participants in the CDA RSP who have not been CDA members up until March 1, 1994, would be allowed a grace period of five years until March 1, 1998, during which they would be eligible to participate in the CDA RRIF, and all participants who invest in the CDA RSP after March 1, 1994, will be subject to the proviso as stated."

TABLED

RESOLVED:

- 93.69 **That the above-tabled motion (Resolution 93.68) be reconsidered by the Board of Governors.**

ADOPTED

RESOLVED:

- 93.70 THAT, by the Fall of 1993 a CDA RRIF be offered, with the same fund investment philosophy in administration structure as that offered by the CDA RSP.

Eligibility requirements will be the same as those currently used for the CDA RSP product, with a proviso that the participant has been a member of the CDA for the past five years. The individual would be allowed a grace period based on payment of fees in arrears. Dentist participants in the CDA RSP who have not been CDA members up until March 1, 1994, would be allowed a grace period of five years until March 1, 1998, during which they would be eligible to participate in the CDA RRIF, and all participants who invest in the CDA RSP after March 1, 1994, will be subject to the proviso as stated.

ADOPTED

- NOTE:** The Governor representing the Manitoba Dental Association opposed this recommendation.

The Board notes that Executive Council undertakes to examine identified areas of concern including the following: CDA RSP eligibility, sliding scale of participation, implications for retired members, and business decisions versus membership concerns, and to report on its findings at the next meeting of the Board.

At the CDSPI April Board meeting, concern was expressed that retirees, who have been members of CDA and/or a provincial co-sponsor, and have given up their license at time of retirement would possibly not meet the eligibility requirements that are now set out under the CDA RSP. From an administrative standpoint, CDSPI will be checking each RRIF applicant to determine eligibility qualifications. If it is determined in such checking that the individual is no longer an active member, but has been an active member and gave up membership because of retirement, it is proposed that this individual would be able to participate in the CDA RRIF by virtue of their past membership and their current retired standing.

It is also proposed, that a special "bonus structure" will be developed so that participants who have been in the CDA RSP for a period of time, will receive a better RRIF benefit than those just purchasing the RRIF from outside the CDA RSP structure.

CDSPI feels that the CDA RSP and CDA RRIF go hand in hand, and those members using both of these vehicles for retirement planning should receive some benefit for having done so.

At the time of the writing of this report, the RRIF legal documents are being finalized, and will be forwarded to CDA for review and signature following Board of Governors consideration of the above recommendation.

4. **CDIP General Insurance Renewal**

CDSPI has received and reviewed a report from F. Wallace Clancy & Son Ltd., the broker of record for the CDIP general insurance plans underwritten by Guardian Insurance Company of Canada.

The Board of Directors have reviewed this report and make the following recommendations pertaining to the renewal of the plans for 1994. CDSPI looks at the general insurance plans from the standpoint of maintaining a very stable market, maintaining good relations with the insurer (Guardian) and maintaining the most effective plans available in the Canadian insurance market for general insurance at the most competitive price. The CDSPI Board of Directors have noted that the general insurance markets are "tightening" and that there has been a small slide in the plan experience in 1992. It is sound financial management therefore to address this negative impact by taking some moderate action at this time. Consequently, there is a slight increase in premiums for 1994. Attached, as APPENDIX I, is a rate schedule for the 1994 general insurance renewal.

APPENDIX I

RESOLVED:

- 93.71 **THAT the CDIP general insurance plans be renewed with Guardian Insurance Company of Canada for the 1994 policy year.**

ADOPTED

RESOLVED:

- 93.72 THAT a premium increase of 5% for Office Contents, Practice Interruption and Comprehensive General Liability Plans, 4% for Tripleguard and 5% on the first level of Malpractice and 4% on the higher levels of Malpractice be implemented for January 1, 1994.

ADOPTED

RESOLVED:

- 93.73 THAT there be a 7% rate guarantee on the Malpractice plan for 1995 as agreed to by Guardian.

ADOPTED

RESOLVED:

- 93.74 THAT a 3% inflation factor be applied on a voluntary basis, for the Office Contents, Practice Interruption and Tripleguard limits at January 1, 1994.

ADOPTED

RESOLVED:

- 93.75 THAT a 50% discount on General Plans be offered to 1994 Dental Graduates who apply for the coverage within three months of graduation.

ADOPTED

RESOLVED:

- 93.76 THAT enhancement to the 1994 coverage as outlined in the brokers report be implemented January 1, 1994.

ADOPTED

The coverage enhancements for 1994 refer to minor adjustments in Office Contents and TripleGuard by extending the contract wording to provide for a condominium unit, coverage in improvements and betterments carried out by the unit owner; Practice Interruption in TripleGuard to provide coverage for losses arising out of power surges or unexplained losses of power subject to a \$500. limit

in any one loss; and, coverage for losses arising out of vermin or insect infestation subject to a \$500. limit in any one loss. Under the Malpractice plan a feature will be added to reimburse the dentist up to a maximum of \$300. per day to a maximum of \$1,200. per claim should he/she be required to attend an Examination for Discovery, pre-trial, trial or appeal hearing. This extended benefit would not apply to the auxiliaries malpractice.

In further examining the CDIP general plans, CDSPI has reviewed the possibility of maintaining a rate stabilization reserve in order to benefit the plans and the profession over a longer term. This fund would be maintained in order to even out any possible changes in the general insurance marketplace which is quite volatile when markets become tight. CDSPI Management and its consultant in this area met with Guardian and presented a report to the CDSPI Board. This report has recommended that a rate stabilization reserve be developed under an agreement which will be provided to the CDA after consideration of the following motion at the September Board. If CDA accepts the recommendation, the agreement will be provided to CDA Management for review and signature prior to January 1, 1994 so that the fund can be in place at the beginning of that coverage year. Other financial options were investigated, but it was decided that until the surplus ownership issue with CDIP Life plan is finalized, none of these areas (similar to that structure of ODQ and RCDS) should be pursued.

The Council on Insurance and Investment has reviewed the report prepared by the consultant.

RESOLVED:

- 93.77 **THAT a rate stabilization reserve for the CDIP General Plans be established with Guardian Insurance as at January 1, 1994 using an agreed cost experience formula method as a basis for building the fund.**

ADOPTED

The Board of Governors directs that the rate stabilization fund agreement be presented to CDA Management following approval of the above recommendation, and that it will have full legal review as part of its presentation.

5. **CDIP 1994 Renewal - Prudential**

CDSPI Management has held a number of meetings with Prudential and Sedgwick James Consulting Group to review all aspects of the CDIP benefit plans. These meetings took place in the Fall of 1992 and early in 1993. Specific direction was given on a number of items including additional research required to set up recommended plan changes for the CDSPI Board in April.

The CDIP benefit plans have served the profession well in the 1980's. CDSPI has made a commitment to review the plans in detail to make sure they are as competitive and meeting the needs of the profession in the 90's as possible. After reviewing the consultants report on the benefit plans, the Council on Insurance and Investment recommends to the CDA Board of Governors.

RESOLVED:

- 93.78 **THAT, subject to complete agreement and approval by legal counsel, the 1994 premium rates for the CDIP Life Plan for January 1, 1994 be reduced by a portion of the available reduction, and that the balance be retained as surplus which could be used for payment in 1995 as a premium rebate to 1994 participants.**

ADOPTED

The Board of Governors directs that the applicable rates and percentages be provided to Management and Executive for approval at their meetings in October, 1993.

The above motion does not contain any specific numbers for two reasons. Firstly, it will not be known until July of 1993 what the proposed rate for 1994 Life premiums will be. When this is known, CDSPI Board will review this at the September Board meeting, and provide a specific recommendation containing rates and percentages for CDA Management consideration. Secondly, there have been no formulas produced or figures calculated as to how to address the 1994 premiums because of the current appeal on the Life surplus. This will have a bearing on what can be done for 1994.

CDA Management will be kept informed in this area as rate approval for 1994 must be set by October 1, 1993.

Level premiums under the Life plan were discussed along with volume discounts, waiver of premium, maximums, and pooling amounts. Studies will be continuing in these areas as CDSPI continues to review these programs on an ongoing basis.

In CDSPI's review of plans, it was noted that there was need for catastrophic coverage under the Life plan. This coverage means that the plan would be protected for any large loss eg. one plane crashing with a number of lives insured on board, so that there would only be a maximum charge to the plan. The Board of Directors at CDSPI recognizing the immediate need for this type of coverage (it was not available when the plans were placed with Metropolitan as Metropolitan could not provide it) presented the following motion to CDA Management at a meeting on May 14th, 1993.

The Council on Insurance and Investment recommendation was accepted by Management Committee at a meeting on May 14th, and this action was reported to Executive Council.

The following recommendation was presented for Board ratification.

RESOLVED:

- 93.79 THAT catastrophic coverage to protect the CDIP Life Plan to a \$10 million level be purchased by Prudential as soon as possible, at an annual premium of \$7,600.; such premium to be part of the retention charges under the plan.**

ADOPTED

If not already covered under the Executive Council or Management report to the CDA, the above motion would need to be ratified by the CDA Board of Governors.

CDA is also reviewing the area of Partnership Insurance. With the new changing profile of the profession, there are more partnerships and associateships than ever before. CDSPI recognizes this fact and is looking at specific coverage in the areas of Life and Long Term Disability that are necessary when such agreements are in place. We are scheduled to bring further information to the CDSPI Board at the September meetings.

Your Council has reviewed and evaluated the current Dependent's Life coverage and felt that it was necessary to provide better spousal coverage comparable to what is now available to the dentist.

RESOLVED:

- 93.80** **THAT the Dependent's Life plan be amended to parallel the benefits and premiums of the participants plan with a maximum coverage level of \$500,000.**

ADOPTED

The Dependent Child benefit will remain unchanged. In reviewing the Disability Insurance, it was noted that currently there are only two elimination periods. The first is for 30 days and the second is for 90 days. It was felt that it was necessary to have a midpoint of an elimination period to suit some practices needs.

RESOLVED:

- 93.81** **THAT effective January 1, 1994, the CDIP Disability plan have a sixty-day elimination period with appropriate rates as quoted.**

ADOPTED

The Council has also reviewed the area of recurrent disabilities. Prudential felt that a change should be made and they did so immediately as there was no cost to the program.

RESOLVED:

- 93.82** **THAT the recurrent disability time period for LTD be extended to 180 days with no change to premium rates to accommodate those disabilities that recur within the longer period of recovery.**

ADOPTED

This provides wider coverage to participants at no charge.

In connection with the Dentists Staff Insurance package, it was felt that because of changing working patterns of auxiliaries, that the coverage needed to be altered pertaining to the number of required hours for eligibility. Currently the plan is 20 hours.

RESOLVED:

- 93.83** **THAT the Dentists Staff Package weekly minimum number of hours requirement be eighteen (18), effective January 1, 1994.**

ADOPTED

The Council on Insurance and Investment will continue its review of the CDIP benefit plans and will bring forward further recommendations when the Council feels there is an appropriate improvement that should be considered for implementation in the plans.

6. CDA RSP

CDSPI has been concerned about the inconsistent performance of the CDA RSP in some fund areas. Meetings have been held with the Fund Managers to analyze risk factors and parameters which are set to monitor very closely their future performance. Canagex (the Fund Manager) have indicated the performance will turn around.

The CDA RSP is managed on the basis of conservative investment parameters to obtain a reasonable rate of return with a minimum amount of risk. Canagex have been instructed that the parameters which are set are to be used to a level of highest risk within those parameters but not exceeding those parameters. CDSPI feels that the purpose of these funds is to maintain a constant and steady reasonable rate of return for the dentists who place their retirement funds with the CDA RSP. These funds are not intended to be high risk, thus the rates will at no time approach those being advertised by other funds who are obtaining extraordinary returns but at an extensive level of risk.

CDSPI has however recognized that some dentists wish to have what we are calling a "high flyer account". Although retirement funds should not necessarily be invested at high risk, it is felt that the profession should have the opportunity within the CDA RSP structure to contribute to such a fund if that is their wish. Such a fund would be appropriately marketed, announced and designated, as a high flyer account with high risk.

This concept has been discussed with our investment consultant, the annuitant holder and the money manager. By setting up the fund in parallel and as part of the current CDA RSP, administrative costs will be kept at a minimum, and convenience of inter-fund transfer will exist similar to what now exists, at no cost. This fund will be monitored similar to all the other funds and the Fund Managers challenged to meet the optimum return within the investment parameters. Also, by having a fund as part of the CDA RSP under its current structure, there is no need for "start up" money which would be needed if the fund was started outside of the current structure.

RESOLVED:

93.84 THAT CDSPI develop the parameters for a High Risk Fund, to be added to the CDA RSP as soon as possible.

ADOPTED

It is anticipated that with the approval of this motion at the September Board of Governors meeting, such a fund can be available for marketing in the late Fall and ready for the 1993-94 RSP season.

7. Legal Expense Insurance

As some of you may be aware, this is not the first time that the topic of Legal Expense Insurance has been before the Board of Governors of the CDA. On two previous occasions CDSPI has looked at this subject and made recommendations to the CDA, but in both cases the CDA Board of Governors voted down the recommendations. At this time, CDSPI brings the product back to the CDA table because there is a major change from the prior product, added coverage on the personal side, and a concern regarding control of this type of coverage.

In addressing the control aspect, one must be aware of the fact that this coverage is proposed to be offered "on the street" by a large national insurance broker to all professions. From our sources there is an indication that dentists will be a major target. There is no idea of how many dentists will buy the coverage, but if it is available on the street, and dentists purchase it, the profession will have no control over that product, will have no control over the contract wordings, and will have no control over the premiums being paid by the profession. In addition, it is CDSPI's mandate to review the insurance market and bring to the CDA and the co-sponsors recommendations for products that can benefit the membership. To not offer this product, could be perceived by the members of the CDA and provincial associations as not providing a choice pertaining to a particular line of coverage available elsewhere. This should be considered when reviewing this section of the report.

This coverage was previously not approved because there were concerns by the CDA Board of Governors that a dentist would have an unlimited resource to fight against the licensing body who would have no similar insurance upon which to draw. We feel that the "no payment unless innocent" aspect of the professional side of the Legal Expense Insurance goes a long way in addressing this concern.

Lastly, the additional plan that has been added - Family Benefit coverage enhances the legal expense package to provide optimum coverage to the purchaser both on a personal side and on the professional side.

The following highlights coverages for both of these plans:

Family Benefits Coverage

- Offers protection to the insured and immediate family against legal expenses resulting from any contentious case even if it doesn't go to trial.
- If the insured has reasonable grounds to launch a lawsuit or must defend one, this coverage will pay the legal fees - up to a maximum of \$100,000 in a single case and \$300,000 in any one year.
- Some types of issues covered are:
 - No fault auto insurance claims
 - Consumer and building disputes
 - Disputes over Will settlements
 - Disputes with tour operators or travel agents
 - Personal injury claims
 - Default on real estate transactions
 - Personal tax investigation
 - Divorce proceedings (only after one year of coverage)
 - Defence of criminal proceedings (contingent upon acquittal or dismissal of charges)
- In the event of a claim, Guardian will determine if the intended legal action is covered and forward a claim form to the insured. When returned to Guardian they will discuss with the insured's lawyer along with their own, for an opinion on the reasonableness of the case. If in both lawyers' opinion it is likely that the case defence will be successful then the legal expenses will be paid.
- This is voluntary coverage under CDIP.

Professional Legal Benefits Coverage

- Provides insurance for legal expenses for issues which arise out of the conduct of a Professional Dental Practice.
- Some situations covered include:
 - Legal representation when subpoenaed as a witness at a Coroner's Inquest.
 - Legal costs incurred in any legislated investigation, tribunal or inquiry where the insured is required to attend including such matters as Human Rights, Provincial Health Insurance Plans and Fitness to Practice or Licensing issues before the insured's Professional Regulatory Board.
 - Legal costs for complaints or discipline matters before a Professional Regulatory Board provided that charges are ultimately withdrawn or the insured is acquitted.
 - Legal costs incurred in enforcing a contractual right of access to health facilities to conduct a professional dental clinic.
 - Legal costs for defence against criminal or statutory charges brought against the insured provided such charges are ultimately withdrawn or dismissed or the insured is acquitted.
 - Representation at an appeal proceeding arising from covered issue.
- In situations where costs for defence of criminal or disciplinary charges are only covered if the insured is acquitted, the insured will be allowed to select his/her own counsel and reasonable costs will be paid only upon acquittal or dismissal of the charges. Guardian must be advised of the action at its commencement.
- The pursuit or defence of any claim or legal proceeding must be based upon reasonable grounds determined by both the insured's and Guardian's legal counsel and any dispute is subject to binding arbitration under the appropriate Arbitration Act.
- Coverage is up to \$100,000 for each claim to an annual maximum of \$300,000 with each claim subject to a deductible of \$1,000.
- This is voluntary under CDIP.

The aspect of having this coverage respond only if the insured has the charges dismissed, withdrawn or the insured is acquitted, plus the aspect of a deductible of \$1,000 per claim, is in place to protect the Licensing Bodies from an insured using this coverage for any or all actions in which the Licensing Body is involved. The insured and Guardian, looking at the situation with their counsel at the beginning would eliminate any guilty or frivolous uses of this coverage against the Licensing Body.

In order to provide additional interpretations, the following may be of interest relating to this coverage:

- Is this insurance in place where there are charges laid against a member on human rights issues eg. refusal to treat HIV+ patients? **YES**
- If the Regulatory Body has to suspend a license because the member is substance abusing and the member wants to challenge the suspension through the legal system, will the insurance pay for the legal costs of the challenge? **YES - but only if the member is acquitted or charges withdrawn.**
- If a member is uncomfortable being called as a witness at a Coroner's Inquest and chooses to hire a lawyer for legal support and accompaniment, would the coverage respond? **YES**
- If the Regulatory Body censors a member for some violation of the Dental Act, could the member legally challenge the action and have the coverage respond? **YES - only if the member is acquitted or the charges withdrawn.**
- If the insured challenges a patient complaint or disciplinary matter does the insurance only respond if the member is acquitted? **YES**
- Does the coverage respond to statutory charges against the insured which are unrelated to dental treatment (as they would fall into Regulatory review)? **YES -if such charges are ultimately withdrawn or dismissed or the insured is acquitted.**

CDSPI feels that this is a form of coverage that the dental profession should have the ability to buy. At the CDSPI Board of Directors meeting the following comment was made:

"If the product is to be on the street, it should be strongly considered as part of CDIP because that is what we are here for - to provide coverage for our members to choose from."

RESOLVED:

- 93.85** **THAT** the following motion be divided in two motions, 1) for Family Legal Benefits Insurance and 2) for Professional Legal Expense Insurance.

"THAT Family Legal Benefits Insurance and Professional Legal Expense Insurance be added to CDIP effective January 1, 1994."

ADOPTED

RESOLVED:

- 93.86** **THAT** Family Legal Benefits Insurance be added to CDIP, effective January 1, 1994.

ADOPTED

RESOLVED:

- 93.87** **THAT** Professional Legal Expense Insurance be added to CDIP, effective January 1, 1994.

DEFEATED

The following recommendation was withdrawn, as the premium was based on both plans being offered.

RESOLVED:

- 93.88** **THAT** the 1994 annual premium for each plan separately be \$300. or if purchased together \$550.

WITHDRAWN

RESOLVED:

- 93.89** **THAT** being a participant in Tripleguard or one of the CDIP Office Contents, Practice Interruption or General Liability Plans be required in order to purchase these plans.

ADOPTED

RESOLVED:

- 93.90** THAT the defeated motion (Resolution 93.87) on Professional Legal Expense Insurance be reconsidered.

ADOPTED**RESOLVED:**

- 93.91** THAT Professional Legal Expense Insurance, excluding coverage for complaints, discipline, licensing and registration matters, be added to CDIP effective January 1, 1994, subject to Executive approval at its October 1993 meeting.

ADOPTED

The requirement to be a participant in one or more of the other general plans is a prerequisite by the insurer in order to eliminate anti-selection. In other words there would be a deterrent to an individual who might only want to buy this coverage from CDIP because they feel they have a need for just buying that one plan. Participating in the other plans helps spread the experience.

It should also be noted that dentists in the Province of Quebec have this coverage available through QDSA.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION**8. CDIP Grad Program**

As you are aware, CDIP offers insurance to students and graduates. In conjunction with this, CDSPI visited all dental faculties during the latter part of 1992 and the spring of 1993. Because of the court ruling that it is inappropriate for a plan surplus to be used to fund the graduate package premium, CDSPI Board approved that the 1992 and 1993 graduate package premium be paid out of the administration fees received by CDSPI. The 1992 cost for this was \$132,000., with a similar cost projected for 1993.

As part of CDSPI's overall review of the plans as well as part of the marketing strategy, the entire grad package concept at the time of the writing of this report is being scheduled for review by Management. The CDSPI 1994 marketing strategy will include a review of the graduate package program.

9. **Request for Funding by CDA**

Because of the increased activities by CDA over the past 2 - 3 years in connection with the surplus issue and the moving of the benefit plans from Metropolitan to Prudential, CDA has informed CDSPI that substantial "extraordinary" costs have been incurred. CDA has requested reimbursement for these costs from CDSPI.

At the time of the writing of this report, discussions are continuing between CDA and CDSPI Management in connection with this request.

10. **Corporate Restructuring**

Although the corporate structure of CDSPI is not part of normal council business, it is felt that it is appropriate to make some comment in this report on this topic based on the fact that the Board of Directors of CDSPI acts as the Council on Insurance and Investment of the CDA.

In late 1992, Management began evaluating the current structure of CDSPI, and concluded that it would be appropriate to conduct a study to determine if a restructuring should take place. At the December 1992 Board of Directors meeting the CDSPI Board instructed Management to proceed with developing a concept for such a review.

A concept was developed and presented to the CDSPI Board at our April 1993 meeting. The concept was approved and at the time of the writing of this Council report, CDSPI Management is commencing with implementing Board direction.

The corporate restructuring study will be looking at both the structure of the Board of Directors and the CDSPI Management Committee. To that end, the search for the "Management Designate" position on the CDSPI Management Committee was postponed until a restructuring proposal could be considered by the CDSPI Board. Such a proposal will be presented at the September meeting of the Board. Corporate restructuring in the area of Board and Management Committee will not only take a look at cost savings, but address the areas of efficiency and effectiveness.

Any restructuring proposal approved by the current CDSPI Board of Directors would have to be ratified by the Corporate Members at a CDSPI Annual meeting in order to authorize any required By-law change(s).

11. **CDSPI - Image and Marketing**

For 1993, CDSPI placed three major topics at the top of the priority listing for the corporation. The review of the individual CDIP plans and examining corporate restructuring has already been addressed and represents two of the three projects. The third relates to image and marketing.

In December of 1992, CDSPI engaged the services of Manifest Communications to assist CDSPI with this very formidable task. Manifest was selected because of their knowledge of the dental profession and past and current dealings with CDA and other organizations affiliated with organized dentistry.

CDSPI realizes that in the 1980's, the products spoke for themselves and "sales created the image and relationship." Because of the economic conditions and people's needs in the 90's, our new strategy has to say is that "the relationship creates the sale."

The new marketing strategy for CDSPI is to provide high level service and the building of the relationship from the time a student enters a Dental Faculty through graduation, to practice initialization and on through their career to planning for retirement and at the end, the purchasing of an annuity or a RRIF.

CDSPI will be working with Manifest, CDA and Corporate bodies to communicate this new image as part of our strategy.

We look forward to building CDIP, the CDA RSP, and any other products as top membership benefits offered by corporate bodies and the CDA. This can only benefit each corporate body and the CDA by working together as a team, in a partnership, we can fulfil your needs as well as those of the profession.

This new image and the entire project is a very exciting and enthusiastic project and by the time of the September Board of Governors meeting, some changes should be evident. We will welcome any comments or input that you may have once you see the new approach unfolding.

12. **Compensation for Observers**

In early 1993, CDSPI received a request from the Atlantic Provinces to place on the agenda for the April 1993 Board meeting, the topic of "Compensation for Observers". The position expressed by the Atlantic Provinces was also confirmed by the Provinces of Saskatchewan and Manitoba.

At the April Board meeting of CDSPI, the topic was tabled until the CDA had an opportunity to discuss it with their Executive Council in June. In addition, it was felt that this could also become part of the consideration of the study for corporate restructuring.

The motion was tabled until the September 1993 CDSPI Board meeting, and will be referred to again at that meeting.

13. **Changes on the Board of Directors**

As at the writing of this report, there has been a change of representation on the CDSPI Board. Dr. Dennis Wells, one of the two Directors for the Province of Ontario has left the CDSPI Board after many years of dedicated service and positive contributions. Dr. Bill Leggett from Ontario will be replacing Dr. Wells at the next Board meeting.

14. **CDSPI/CDA Co-sponsors**

During 1993, CDSPI has continued to meet with co-sponsors and the CDA. Additionally, CDA's and CDSPI's Management Committee meetings have taken place as deemed necessary, to continue our excellent communications and to make sure communication channels remain open.

In addition, CDSPI Management has met with various groups in the Provinces of Alberta, Saskatchewan, Manitoba, Newfoundland, Nova Scotia, Prince Edward Island, and Ontario.

CDSPI Management finds these meetings extremely useful and has developed a new format for 1993. Rather than coming with a time consuming presentation, there is a brief address given at the start of the meeting followed by an open forum discussion at which we want to know what's good, what's bad, what is

desired, what should be changed. As CDSPI is the dentist's company, dentists should have input into what happens and how it happens. Our meetings with co-sponsors through your cooperation has provided us with some very useful ideas and suggestions which we always review and consider for implementation. To those whom we have visited, we again thank you for permitting us to do so.

Respectively submitted,

Roderick L. Moran, D.D.S., F.R.C.D.(C)
Chairman, Council on Insurance and Investment
President, CDSPI

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Council on Insurance and Investment.

RATE SCHEDULE

1994 GENERAL INSURANCE - RENEWAL COMPARISONS

	<u>CURRENT RATES (1993)</u>		<u>PROPOSED RATES (1994)</u>	
	<u>Net</u>	<u>Gross*</u>	<u>Net</u>	<u>Gross*</u>
A. OFFICE CONTENTS:	Per Provincial Schedules		5% Increase	
Valuable Papers (per \$1,000)	1.49	1.71	1.49	1.71
Extra Expense (per \$1,000)	1.49	1.71	1.49	1.71
Money & Securities (per \$1,000)	19.68	22.63	19.68	22.63
Dishonesty & Forgery (per \$1,000)	4.70	5.41	4.70	5.41
Accounts Receivable (per \$1,000)	1.49	1.71	1.49	1.71
Rental Value (per \$1,000)	1.49	1.71	1.49	1.71
Additional Lease Expense (per \$1,000)	1.00	1.15	1.00	1.15

CURRENT RATES (1993) PROPOSED RATES (1994)

Net Gross* Net Gross*

B. PRACTICE INTERRUPTION:

(per \$1,000)

\$0. - \$50,000.	1.48	1.70	5% Increase
\$50,001. +	1.10	1.27	1.56 1.79
			1.16 1.33

C. COMPREHENSIVE GENERAL LIABILITY:

\$2,000,000. Inclusive	98.00	113.00	5% Increase
\$3,000,000. Inclusive	130.00	150.00	103.00 118.00
\$4,000,000. Inclusive	149.00	171.00	137.00 158.00
\$5,000,000. Inclusive	163.00	187.00	156.00 179.00
			171.00 197.00

D. TRIPLEGUARD:

Per Provincial Schedules

4% Increase

E. OPTIONAL BREAKDOWN:

1. Office Contents	152.00	175.00	152.00 175.00
2. Tripleguard	109.00	125.00	109.00 125.00

		<u>CURRENT RATES (1993)</u>		<u>PROPOSED RATES (1994)</u>	
		<u>Net</u>	<u>Gross*</u>	<u>Net</u>	<u>Gross*</u>
F.	DATA PROCESSING: (Per \$1,000)	3.04	3.50	3.04	3.50
G.	PULP:				
	\$3,000,000. Excess	114.00	131.00	114.00	131.00
	\$4,000,000. Excess	131.00	151.00	131.00	151.00
	\$5,000,000. Excess	143.00	164.00	143.00	164.00

* Please Note: (Net + 15% = Gross)

The gross premiums proposed for 1994 have been rounded to the nearest dollar.

None of the Rates/Premiums outlined in this report include any G.S.T. or Provincial Taxes which may be applicable.

H. MALPRACTICE:

CURRENT PREMIUMS (1993)

	\$ 500. Deductible		\$ 1,000. Deductible		\$ 2,000. Deductible	
	Net	Gross*	Net	Gross*	Net	Gross*
\$2,000,000./\$6,000,000. aggregate	585.	673.	561.	645.	546.	628.
\$3,000,000./\$9,000,000. aggregate	637.	733.	613.	705.	598.	688.
\$4,000,000./\$12,000,000. aggregate	668.	768.	644.	741.	629.	723.
\$5,000,000./\$15,000,000. aggregate	694.	798.	670.	771.	655.	753.
Auxiliaries:						
\$2,000,000./\$6,000,000. aggregate	17.	20.	not available		not available	

H. MALPRACTICE (continued):

PROPOSED PREMIUMS (1994)

	\$ 500. Deductible		\$ 1,000. Deductible		\$ 2,000. Deductible	
	Net	Gross*	Net	Gross*	Net	Gross*
\$2,000,000./\$6,000,000. aggregate (5% Increase)	614.	706.	589.	677.	573.	659.
\$3,000,000./\$9,000,000. aggregate (4% Increase)	662.	761.	638.	734.	622.	715.
\$4,000,000./\$12,000,000. aggregate (4% Increase)	695.	799.	670.	771.	654.	752.
\$5,000,000./\$15,000,000. aggregate (4% Increase)	722.	830.	697.	802.	681.	783.
Auxiliaries:						
\$2,000,000./\$6,000,000. aggregate (5% Increase)	18.	21.	Not available		Not available	

* Please Note: (Net + 15% = Gross)

The gross premiums have been rounded to the nearest dollar.

None of the Rates/Premiums outlined in this report include any G.S.T. or Provincial taxes which may be applicable.

1994 OFFICE CONTENTS RATES (GROSS)

	250 DED	250 DED	250 DED	500 DED	500 DED	500 DED
LIMIT	OFFICE CONTENTS F.R.	OFFICE CONTENTS MASONRY	OFFICE CONTENTS FRAME	OFFICE CONTENTS F.R.	OFFICE CONTENTS MASONRY	OFFICE CONTENTS FRAME
EAST						
10000	94	114	129	84	102	114
15000	120	149	174	106	130	154
20000	145	181	217	128	161	192
25000	171	217	260	152	192	232
30000	191	243	296	170	217	264
35000	211	267	329	188	240	294
40000	230	291	360	205	264	324
45000	245	315	388	222	288	349
50000	260	339	416	235	309	374
55000	275	363	444	248	330	399
60000	290	387	472	261	351	424
65000	305	411	500	274	372	449
70000	320	435	528	287	393	474
75000	335	459	556	300	414	499
80000	350	483	584	313	435	524
85000	365	507	612	326	456	549
90000	380	531	640	339	477	574
95000	395	555	668	352	498	599
100000	410	579	696	365	519	624
PER 5000	10.50	17.85	19.95	8.40	14.70	17.85
WEST						
10000	84	99	114	72	86	102
15000	100	118	138	87	105	123
20000	115	138	165	103	123	146
25000	133	162	197	118	145	176
30000	144	178	222	127	159	196
35000	155	195	244	139	174	218
40000	167	210	268	148	188	238
45000	178	227	291	156	199	255
50000	185	239	307	164	210	270
55000	194	251	323	172	221	285
60000	203	263	339	180	232	300
65000	212	275	355	188	243	315
70000	221	287	371	196	254	330
75000	230	299	387	204	265	345
80000	239	311	403	212	276	360
85000	248	323	419	220	287	375
90000	257	335	435	228	298	390
95000	266	347	451	236	309	405
100000	275	359	467	244	320	420
PER 5000	6.30	7.35	11.55	5.25	6.30	10.50

1

1994 TRIPLE GUARD RATES (GROSS)

	250 DED	250 DED	250 DED	500 DED	500 DED	500 DED
LIMIT	TRIPLE GUARD F.R.	TRIPLE GUARD MASONRY	TRIPLE GUARD FRAME	TRIPLE GUARD F.R.	TRIPLE GUARD MASONRY	TRIPLE GUARD FRAME
25000	317	354	402	305	338	382
30000	331	371	425	317	354	402
35000	344	389	448	330	370	423
40000	357	406	470	341	385	443
45000	368	420	489	350	397	459
50000	381	436	511	362	412	478
55000	391	449	528	371	424	494
60000	402	465	547	382	438	512
65000	412	476	564	390	448	526
70000	422	490	581	399	461	542
75000	431	501	595	407	470	554
80000	440	514	612	416	483	570
85000	448	524	624	423	491	582
90000	461	539	643	435	505	599
95000	471	551	658	444	516	613
100000	482	564	673	454	528	627
105000	492	576	687	464	540	640
110000	501	588	702	473	550	654
115000	511	598	714	482	561	665
120000	521	610	729	491	571	678
125000	530	622	743	500	582	692
130000	540	632	756	509	592	703
135000	550	645	771	519	604	718
140000	560	656	784	527	614	730
145000	569	667	798	537	625	743
150000	577	677	809	544	633	753
155000	587	687	823	553	645	765
160000	596	699	835	562	654	777
165000	603	707	846	569	662	787
170000	613	718	859	577	672	799
175000	622	729	872	587	683	811
180000	630	738	884	594	692	822
185000	639	749	894	602	701	833
190000	647	758	907	609	709	843
195000	656	770	919	619	721	856
200000	666	780	933	627	730	867
PER 5000	7.28	9.36	11.44	7.28	8.32	9.36

COMMISSION ON DENTAL ACCREDITATION OF CANADA

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

- Members:** Dr. Ralph Brooke, London - Chairman
Dr. Kenneth Bentley, Montreal
Ms. Wendy Halowski, Vancouver (replacing M. Forgay)
Dr. Michael Lasko, Winnipeg
Dr. Brian Leroy, Edmonton
Dr. Guy Maranda, Sainte-Foy
Dr. David Murphy, Dartmouth
Mrs. Marlane Paquin, Vancouver
Dr. Kevin Roach, Pembroke
Dr. Denis Robert, Sainte-Foy
Ms. Susanne Sunell, Vancouver
Dr. Ian Vogan, Halifax
Dr. Philip Watson, Don Mills
Ms. Donna Wells, North York
- Absent:** Dr. Henry Dick, Edmonton
Prof. Margery Forgay, Winnipeg
- Observers:** Dr. Gordon Thompson, Chairman, CDA Council on Education, Edmonton
Dr. Mario Santangelo, Representative ADA Commission on Dental Accreditation, Chicago
- Staff:** Mr. Brian Henderson, Director
Ms. Susan Matheson, Associate Director
Dr. Arthur Schwartz, Associate Director
Ms. Gay MacQuarrie, Coordinator
Ms. Laura Malo, Assistant to the Coordinator

1. Commission Meetings

Since the 1992 Annual Meeting of the CDA Board of Governors, the Commission on Dental Accreditation of Canada convened once – on November 17, 1992 – for its regular annual meeting.

ITEMS REQUIRING BOARD ACTION**2. Commission Terms of Reference****APPENDIX I**

In 1991, the Commission developed (in some cases) and reviewed, for consistency, the terms of reference of its sub-committees. As follow-up, the Commission reviewed its own terms of reference, for consistency, in 1992. There was discussion of the use of "Chair" versus "Chairperson". The Commission understands that the proposed Terms adhere to the CDA guidelines.

RESOLVED:

93.92 THAT the proposed Terms of Reference for the Commission on Dental Accreditation of Canada be approved with the following changes:

- "Allied Dental Educators Section" of ACFD changed to "Allied Dental Educators Committee",
- any reference to "dental allied" changed to read "allied dental".

ADOPTED**RESOLVED:**

93.93 THAT the Council on Constitution and By-Laws be directed to prepare the necessary By-Law amendments.

ADOPTED**ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION****3. 1992 Surveys**

Based on site visits in 1992, the Commission accredited 12 university dental education programs, 6 allied dental education programs, 12 dental internship or residency education programs and 16 health facility dental services across Canada. The following were accredited:

Dental Education Programs

Université Laval

Doctorat en médecine dentaire

Programme de Chirurgie buccale et maxillo-faciale

McGill University

Doctor of Dental Surgery

Oral and Maxillofacial Surgery

University of Toronto

Dental Public Health

Doctor of Dental Surgery

Oral Pathology

Oral Radiology

Oral and Maxillofacial Surgery

Paediatric Dentistry

Periodontics

Prosthodontics

Allied Dental Education Programs - Dental Hygiene

CÉGEP Chicoutimi, Chicoutimi

College of New Caledonia, Prince George

Allied Dental Education Programs - Dental Assisting

Douglas College, New Westminster

Holland College, Charlottetown

Okanagan College, Kelowna

Red River Community College, Winnipeg

Dental Internship or Residency Education Programs

Centre hospitalier Notre-Dame, Montréal

Health Sciences Centre, Winnipeg

Hospital for Sick Children, Toronto

Jewish General Hospital, Montreal

Montreal Children's Hospital, Montreal

Montreal General Hospital, Montreal

Mount Sinai Hospital, Toronto

Royal Victoria Hospital, Montreal

St. Mary's Hospital, Montreal

St. Michael's Hospital, Toronto

Sunnybrook Health Science Centre, Toronto

The Toronto Hospital, Toronto

Health Facility Dental Services

Baycrest Hospital, Toronto
Centre hospitalier Notre-Dame, Montréal
Doctor's Hospital, Toronto
Health Sciences Centre, Winnipeg
Hôpital l'Enfant-Jésus, Québec
Hospital for Sick Children, Toronto
Jewish General Hospital, Montreal
Montreal Children's Hospital, Montreal
Montreal General Hospital, Montreal
Mount Sinai Hospital, Toronto
Queen Elizabeth Hospital, Toronto
Royal Victoria Hospital, Montreal
St. Mary's Hospital, Montreal
St. Michael's Hospital, Toronto
Sunnybrook Health Science Centre, Toronto
The Toronto Hospital, Toronto

The Commission reviewed progress reports from two specialty dental education programs, seven allied dental education programs, two dental internship or residency education programs, and one health facility dental service.

4. 1993 Survey Schedule

For 1993, the Commission is expected to complete a total of 21 accreditation surveys of the following:

- University of Manitoba (DMD, two specialty education programs and one dental hygiene program),
- University of Toronto (one specialty education program)
- ten allied dental education programs,
- four health facility dental services, and
- two dental internship or residency education programs.

5. Dental Hygiene and Dental Assistant Education Requirements

The Commission resolved to review and revise the accreditation requirements for dental hygiene and dental assistant programs with a view to enhancing the curriculum portion to include guidelines suggesting more appropriate depth and scope of practice.

6. Accreditation of Health Facility Dental Services

The Commission discussed the role of the Canadian Council on Health Facilities Accreditation (CCHFA) with regard to the accreditation process of dental services in Canadian health facilities. It was noted that CCHFA accredits hospitals every three years, rather than five years as the Commission does, but does not have the expertise to look at the dental services. As well, the Commission's accreditation process supports the professional interest of dentistry in the institutional context.

7. Relations with the *Ordre des dentistes du Québec*

In the Commission's continued partnership with the *Ordre des dentistes du Québec* (ODQ), the Director will meet with ODQ representatives to discuss coordination of accreditation site visits in Quebec and related documentation.

8. Health Facilities Committee 3 - Terms of Reference

Possible changes to criteria for membership on the Health Facilities Committee were discussed with final discussion deferred to the next meeting of the Commission.

9. Report of the Commission Representative to the National Dental Examining Board of Canada

The Chairman of the Commission read for information, a memorandum dated November 6, 1992 to the Deans of the Faculties of Dentistry from the National Dental Examination Board's Executive Director, Dr. G. Kravis. The memo outlined motions passed by the NDEB Board at their November 1992 annual meeting; motions which will affect the national certification process for graduates in dentistry.

10. Revisions to Accreditation Requirements

i. Bloodborne Infectious Diseases

The Commission on Dental Accreditation of the American Dental Association has developed a new standard concerning instruction on the topic of bloodborne infectious diseases. The Canadian Commission approved incorporation of a comparable standard into the current Canadian requirements.

ii. Basic Life Support

The Commission on Dental Accreditation of the American Dental Association has developed a new standard on instruction and certification in basic life support. The Canadian accreditation process currently includes a requirement that students receive instruction (and certification) in basic life support. The Commission, however, has requested information from the Canadian Heart and Stroke Foundation regarding guidelines on basic life support training for health care professionals with a view to reviewing our requirements.

iii. Oral and Maxillofacial Surgery Requirements

The Commission resolved to adopt the ADA's Commission on Dental Accreditation standards (approved for implementation January 1993) for specialty education programs in Oral and Maxillofacial Surgery. However, before complete integration into Canadian accreditation requirements, the new definition for Oral and Maxillofacial Surgery will be forwarded to the Canadian Association of Oral and Maxillofacial Surgeons for comment.

11. Fee Schedule 1992-1997

The Commission approved a five-year fee schedule for 1992 to 1997 which, beginning in 1993, will provide an annual three percent increase in fee charged for accreditation in all areas (university programs, allied dental education programs, dental internship or residency education programs, and health facility dental services).

12. Ontario College Standards and Accreditation Council

There has been continuing communication between the Ontario College Standards and Accreditation Council (CSAC), the Ministry of Colleges and Universities of Ontario and the Ontario Council of Regents and the Commission regarding allied dental education programs in Ontario community colleges. The Commission has directed staff to further communicate the Commission's concern on compressed vocational programs for allied dental education programs in Ontario.

13. Ontario Ministry of Colleges and Universities

The Commission has expressed a willingness to participate with the Royal College of Dental Surgeons of Ontario, Dental Hygiene Matters Committee, in a presentation to the Ontario Ministry of Colleges and Universities regarding dental hygiene in Ontario.

14. **Recognition of Service**

The Commission resolved to formally recognize two individuals – Drs. Arthur Schwartz and Mario Santangelo – who have made distinguished contributions to the Commission. Each will receive a certificate from the Commission.

15. **Accreditation Video**

Commissioners viewed a video on the accreditation process entitled "Guess Who's Coming to Visit" produced by the ADA's Commission on Dental Accreditation. A similar initiative might be considered by the Canadian Commission in the future, depending upon costs and budget.

16. **Meeting Dates**

The Commissioners agreed to convene their annual series of meetings beginning on a Sunday in order to reduce air travel costs.

17. **Closing**

On behalf of the Commission, I wish to express thanks to Brian Henderson, Director of Education and Accreditation; Susan Matheson, Associate Director; Gay MacQuarrie, Coordinator; and Laura Malo, Assistant to the Coordinator; for the excellent staff support provided the Commission, its committees and accreditation survey teams.

Respectfully submitted,

Ralph Brooke, B.Ch.D., L.D.S.,
Cert. Oral Pathology, MRCS, LRCP,
FDSRCS, FRCD, FICD
Chairman, Commission on Dental
Accreditation of Canada

FILING OF REPORT

The Board of Governors accepts with appreciation the report of the Commission on Dental Accreditation of Canada.

CURRENT
Terms of Reference
Commission on Dental Accreditation of Canada

The Commission on Dental Accreditation of Canada shall consist of fifteen members. In electing the membership of the commission, the Board of Governors will ensure that representation is constituted as follows:

- (1) One person appointed by the Canadian Dental Association
- (2) One person who is active in Hospital and or Institutional Dentistry appointed by the Canadian Dental Association
- (3) Three persons appointed by the Association of Canadian Faculties of Dentistry, one of which shall be a representative of the Committee of Deans
- (4) One person appointed by the Association of Canadian Faculties of Dentistry's Allied Dental Educators **Committee**
- (5) Two persons appointed by the National Dental Examining Board of Canada
- (6) Two persons appointed by the Provincial Dental Licensing Authorities
- (7) One person appointed by the Royal College of Dentists of Canada
- (8) One person appointed by the Canadian Dental Assistants' Association
- (9) One person appointed by the Canadian Dental Hygienists' Association
- (10) One person appointed by the Canadian Dental Association's Committee on Dental Specialties
- (11) A lay person appointed by the Commission on Dental Accreditation of Canada.

The Chairman of the Commission on Dental Accreditation of Canada shall be elected from among the members of the commission in the following fashion: Any two members of commission may propose and second a nomination to be received directly by the Canadian Dental Association Committee on Nominations, Awards and Trusts. The Canadian Dental Association Committee on Nominations, Awards and Trusts will employ a secret ballot of the Commission on Dental Accreditation of Canada if more than one nomination is received. If the ballot does or does not result in a tie, the President of the Canadian Dental Association shall on the recommendation of Executive Council make the nomination and ratify the appointment.

The term of office for the Chairman of the Commission on Dental Accreditation of Canada shall be two (2) years, renewable once by election. Election to commission shall be for a term of three years, staggered, once renewable. No person shall hold more than one position on the Commission on Dental Accreditation of Canada.

The Commission on Dental Accreditation of Canada shall be empowered to make decisions on accreditation standards, policies and processes and may appoint consultants or advisors. It may make recommendations on resources required to support its initiatives. Budgets supporting this commission shall be subject to the approval of the

Commission on Dental Accreditation of Canada and Canadian Dental Association Board of Governors. Expenditures of funds within budget shall be the responsibility of the Director of Education and Accreditation. Summaries of revenues and disbursements shall be provided annually to all constituencies represented on the Commission on Dental Accreditation of Canada.

It shall be the duty of the Commission on Dental Accreditation of Canada:

- i) To function as a partnership of organizations and expertise concerned with protecting and furthering the public interest through the accreditation process as applied to educational programs for dentists, dental specialists, dental auxiliaries, dental residencies/internships and associated institutional dental services.
- ii) To ensure that the accreditation process promotes the preparation of competent dentists and dental auxiliaries by:
 - a) defining acceptable national standards as a basis for accreditation;
 - b) establishing comprehensive accreditation requirements for the specific educational programs;
 - c) reviewing each educational program against the appropriate national standard, as set out in the accreditation requirements and identifying programs in compliance with standards;
 - d) cooperating with provincial licensing authorities, the National Dental Examining Board of Canada, and others, as appropriate, with respect to current and developing certification process;
 - e) cooperating with organizations representing dental auxiliaries, Provincial Licensing Authorities and the National Dental Examining Board of Canada with respect to the development of certification requirements and processes for dental auxiliaries.
- iii) To report annually to the Board of Governors of the Canadian Dental Association and all other constituencies.

The Commission on Dental Accreditation of Canada shall have the power to appoint committees and sub-committees as it shall deem expedient.

Changes approved at 1993 Interim Meeting are highlighted.

PROPOSED
Terms of Reference
Commission on Dental Accreditation of Canada

The Commission on Dental Accreditation of Canada shall consist of fifteen members. In electing the membership of the Commission, the Board of Governors will ensure that representation is constituted as follows:

- (1) One person appointed by the Canadian Dental Association
- (2) One person who is active in Hospital and or Institutional Dentistry appointed by the Canadian Dental Association
- (3) Three persons appointed by the Association of Canadian Faculties of Dentistry, one of which shall be a representative of the Committee of Deans
- (4) One person appointed by the Association of Canadian Faculties of Dentistry's **Allied Dental Educators Committee**
- (5) Two persons appointed by the National Dental Examining Board of Canada
- (6) Two persons appointed by the Provincial Dental Licensing Authorities
- (7) One person appointed by the Royal College of Dentists of Canada
- (8) One person appointed by the Canadian Dental Assistants' Association
- (9) One person appointed by the Canadian Dental Hygienists' Association
- (10) One person appointed by the Canadian Dental Association's Committee on Dental Specialties
- (11) A lay person appointed by the Commission on Dental Accreditation of Canada.

The Chairman of the Commission on Dental Accreditation of Canada shall be elected from among the members of the commission in the following fashion: Any two members of commission may propose and second a nomination to be received directly by the Canadian Dental Association Committee on Nominations, Awards and Trusts. The Canadian Dental Association Committee on Nominations, Awards and Trusts will employ a secret ballot of the Commission on Dental Accreditation of Canada if more than one nomination is received. If the ballot does or does not result in a tie, the President of the Canadian Dental Association shall on the recommendation of Executive Council make the nomination and ratify the appointment.

The term of office for the Chairman of the Commission on Dental Accreditation of Canada shall be two (2) years, renewable once by election. Election to commission shall be for a term of three years, staggered, once renewable. No person shall hold more than one position on the Commission on Dental Accreditation of Canada.

The Chairman of the Commission on Dental Accreditation of Canada shall sit as an observer to the Council on Education and the Chairman of the Council on Education shall sit as an observer to the Commission on Dental Accreditation of Canada.

The Chairman of the Commission shall act as a Representative of the Commission to the National Dental Examining Board of Canada.

A representative of the American Dental Association's Commission on Dental Accreditation shall sit as an observer to the Commission.

The Commission on Dental Accreditation of Canada shall be empowered to make decisions on accreditation standards, policies and processes and may appoint consultants or advisors. It may make recommendations on resources required to support its initiatives. Budgets supporting this commission shall be subject to the approval of the Commission on Dental Accreditation of Canada and Canadian Dental Association Board of Governors. Expenditures of funds within budget shall be the responsibility of the Director of Education and Accreditation. Summaries of revenues and disbursements shall be provided annually to all constituencies represented on the Commission on Dental Accreditation of Canada.

It shall be the duty of the Commission on Dental Accreditation of Canada:

- i) To function as a partnership of organizations and expertise concerned with protecting and furthering the public interest through the accreditation process as applied to educational programs for dentists, dental specialists, **allied dental personnel**, dental residencies/internships and associated institutional dental services.
- ii) To ensure that the accreditation process promotes the preparation of competent dentists and **allied dental personnel** by:
 - a) defining acceptable national standards as a basis for accreditation;
 - b) establishing comprehensive accreditation requirements for the specific educational programs;
 - c) reviewing each educational program against the appropriate national standard, as set out in the accreditation requirements and identifying programs in compliance with standards;
 - d) cooperating with provincial licensing authorities, the National Dental Examining Board of Canada, and others, as appropriate, with respect to current and developing certification process;
 - e) cooperating with organizations representing **allied dental personnel**, Provincial Licensing Authorities and the National Dental Examining Board of Canada with respect to the development of certification requirements and processes for **allied dental personnel**.
- iii) To report annually to the Board of Governors of the Canadian Dental Association and all other constituencies.

The Commission on Dental Accreditation of Canada shall have the power to appoint committees and sub-committees as it shall deem expedient.

**ASSOCIATION OF CANADIAN FACULTIES OF DENTISTRY
L'ASSOCIATION DES FACULTÉS DENTAIRES DU CANADA**

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

Members of the Association elected Dr. Helen Lyttle, University of Manitoba, President-elect and Dr. David Donaldson, University of British Columbia, Vice-President at the June 1993 meeting held in Saskatoon. Dr. Lyttle was a member of the ACFD/AFDC Research Committee prior to the restructuring of ACFD/AFDC in 1990 and since then has served on the Faculty Member Development Committee as the Manitoba representative. Dr. Lyttle is also active in the Canadian Dental Association, serving as an ACFD/AFDC representative to the Council on Education. Dr. Ralph Brooke, University of Western Ontario, Past-President, Dr. Ralph Barolet, McGill University, Chair of the Deans Committee and Dr. Ralph Burgess, University of Toronto, Chair of the Program Development Committee all finished their terms at the June meeting. Dr. Barolet, McGill University will be succeeded by Dr. Barry Sessle as Chair of the Deans Committee and Dr. Jack Gerrow, Dalhousie University was elected Chair of the Program Development Committee. The Allied Dental Educators Committee has a new Chair, Mrs. Marlane Paquin, University of British Columbia replacing Ms. Susanne Sunell.

Five Faculties have named W.W. Wood Award recipients. They are UBC - Dr. Donald Brunette; U of Manitoba - Dr. George Bowden; Dalhousie - Dr. Robin Howell; U of Saskatchewan - Dr. Ernest Ambrose; UWO - Dr. Robert McConnell and McGill University - Dr. Stephane Schwartz. The W.W. Wood Award for Excellence in Dental Education is awarded each year to a full or part-time faculty member who has completed at least three years of teaching in a Canadian Faculty of Dentistry.

The 1994 Annual General Meeting of the ACFD/AFDC will be held in Seattle, Washington in conjunction with the 71st Annual Session and Exposition of the AADS. Plans are underway to present a Symposium entitled "Clinical Competency & Licensure: How Are They Related?". Dr. Helen Lyttle will be coordinating arrangements for this Symposium.

The ACFD/AFDC President has written a letter to each of the Provincial Licensing Authorities in Canada requesting confirmation of their plans for long-term portability with no restrictions of graduates from other provinces following the introduction of the NDEB examination for certification.

Five project applications have been funded by the ACFD/AFDC for 1993. These projects include two from the University of Toronto; two from Dalhousie and one from the University of Manitoba for a total of \$7500.

The ACFD/AFDC FORUM has begun accepting advertising for future publications. The Association has had to reduce the number of issues of THE FORUM due to budget constraints and it is hoped that advertising revenue will generate sufficient funds to resume publishing four issues a year in the near future.

A Competency Workshop is planned for October 23-24, 1993 in Montreal. ACFD/AFDC in co-operation with the NDEB and CDA will be meeting to draft a Professional Performance Profile for dentistry. Immediately following the Workshop on Monday, October 25th the Objective Structured Clinical Examination (OSCE) will be discussed.

The Summer Teaching and Management Institutes were held in June at the University of Western Ontario with 31 participants, seven of which were from the U.S. The Summer Management Institute was a four-day course this year while the Teaching Institute ran for eight days. Dr. David Chambers, University of the Pacific conducted the Management Institute and Dr. Marilyn Robinson along with other Faculty members from the University of Western Ontario were responsible for the Teaching Institute. Participants found the Institutes both challenging and rewarding. The support of the CFDE in funding these Institutes each year is acknowledged and greatly appreciated by all members of the Association of Canadian Faculties of Dentistry.

Respectfully submitted,

Gérald Albert, President
Association of Canadian Faculties
of Dentistry

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Association of Canadian Faculties of Dentistry as information.

CANADIAN DENTAL ASSISTANTS' ASSOCIATION

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

The Canadian Dental Assistants' Association welcomes this opportunity to report to the Board of Governors on the activities of the Association.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1. 1993 Annual General Meeting

The 1993 Annual General Meeting of CDAA was held May 1-2, 1993 in Toronto, Ontario.

Elections held:	President:	Gail Armitage, Calgary, Alberta
	Vice-President:	Charlotte Peer-Miller, London, Ontario
	Past-President:	Betty Copp, Fredericton, New Brunswick

Appointments: Louise Mabey remains as Registrar
Charlotte Peer-Miller - Journal Editor

2. Location

At this time, we have decided to remain in London and have renewed our agreement with the ODN&AA until December 31, 1993.

We are in the process of hiring a part-time staff person with skills in administration, accounting, printing as well as clerical experience. Relocation submissions will be reviewed and hopefully we can decide on our future permanent location at our Fall Planning Meeting.

3. Future Planning Session

We are planning a Fall Board Session focusing on our certification program, examination process, and possible changes that could be to the benefit of all CDAA members. We would like to see an end to duplication of services between the national and provincial bodies. We would like to see one national board exam used as a standard by all provinces, and with an exam bank accessed by the provinces, but with licensure being a provincial function. Provinces would collect an assessment fee for the national body, and we would assist the provinces in areas of education and member services.

4. Examination

Currently CDAA has both Level I and Level II examinations in place, and we continue with on-going exam development.

5. By-Laws

Our By-Laws are in the third and final stages of development.

6. Member Services

CDAA members are now entitled to a \$9,000.00 life insurance policy upon payment of dues, and our Member Services Committee continue to investigate further benefits.

7. Continuing Education

Our continuing education program continues to be operated from the offices of the Saskatchewan Dental Assistants Association offices.

8. National Dental Assistants Week

The dates of March 20-26, 1994, have been selected for this week. At our AGM, it was decided to remove the word "recognition" from the name of this week.

9. FDI/CDA October '94

We look forward to attending these meetings, and hope that we may once again be active participants, as in the past.

On behalf of the CDAA Board of Directors, I wish you a successful meeting. We continue to appreciate the opportunity to be represented at your Board, and for the assistance and advice you offer our Association.

Respectfully submitted,

Gail Armitage, President,
Canadian Dental Assistants' Association

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Dental Assistants' Association as information.

CANADIAN DENTAL FOUNDATION

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Foundation	Dr. Bradley Holmes, President, Kenora
Directors:	Mr. Jardine Neilson, Secretary-Treasurer, Ottawa
	Mr. Don Pamenter, Halifax
	Dr. Arthur Schwartz, Winnipeg
	Dr. John Silver, Vancouver
	Dr. Doug Smith, Belleville
Coordinator:	Mrs. Martha Vaughan

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1. CDF Directors have not met since the May 1993 CDA Board of Governors meeting, however, there has been constant communication between directors concerning the plans to merge CDF, CFDE, the Grieve Memorial Lectureship Fund, the Canadian Dental Research Foundation and the Library Trust Fund. The CDF Board endorses the proposal to integrate these charities into one administration. This will ensure that dental fundraising efforts will be coordinated. It is expected that the merger plan will be complete in the next few months.
2. Mr. Ron Bonar, CDF Vice-President has resigned. As previously reported, the terms of office of Dr. Doug Smith and Dr. John Silver have been extended until the merger of the charities has been concluded. By the end of 1993, the terms of office of Dr. Arthur Schwartz and Mr. Don Pamenter will have come to an end. CDF will not replace these vacancies because the new charitable entity will require a new board of directors.
3. Audited Financial Statements

APPENDIX I

The audited financial statements for 1992 show CDF revenues from investments at \$172,606. Due to the expected decline in interest rates, CDF granted a one-time sum of \$75,000 to CDA for library operations. Therefore the total grant from CDF to CDA in 1992 was \$214,000. Of this amount, \$21,200 was deposited into the Library Trust Fund which is used exclusively for the purchase of books, journals and videos.

-
4. CDA Management Committee made a donation to CDF in the name of the late Mrs. Olive Utas, wife of Dr. Gilbert Utas, CDA Past President.

Respectfully submitted,

Bradley W. Holmes
President

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Dental Foundation as information.

CANADIAN DENTAL FOUNDATION

FINANCIAL STATEMENTS

DECEMBER 31, 1992

LA FONDATION DENTAIRE CANADIENNE

ETATS FINANCIERS

31 DECEMBRE 1992

McCAY, DUFF & COMPANY

CHARTERED ACCOUNTANTS

JOHN W. FRANKLIN, C.A.
THOMAS W. HOWARTH, C.A.
BRYAN E. SULLIVAN, C.A.
ALBERT G. MONSIEUR, B.ADMIN., C.A.
BLAIR E. DAVIDSON, B.COMM., C.A.
G. WARREN TRICKEY, B.COMM., C.A.
ROBERT D. SHANTZ, B.MATH., C.A.

CONSULTANT - ELDREN E. MCCONNELL, C.A.

330 McLEOD ST.
OTTAWA, ONT.
K2P 2C5
(613) 236-2367
1 (800) 267-6551
FAX: 236-5041

AUDITORS' REPORT

To the Trustees of
Canadian Dental Foundation.

We have audited the balance sheet of the Canadian Dental Foundation as at December 31, 1992 and the statements of equity and revenue and expenses for the year then ended. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Foundation as at December 31, 1992 and the results of its operations for the year then ended in accordance with generally accepted accounting principles.

McCay, Duff & Co.

Chartered Accountants.

Ottawa, Ontario,
February 26, 1993.

CANADIAN DENTAL FOUNDATION

BALANCE SHEET

AS AT DECEMBER 31, 1992

	ASSETS	1992	1991
CURRENT			
Cash	\$	-	\$ 32,127
Investments (Schedule A)		2,013,610	1,894,547
Accounts receivable		30,047	19,865
Prepaid expense		<u>833</u>	<u>67,940</u>
		<u>\$2,044,490</u>	<u>\$2,014,479</u>

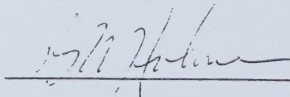
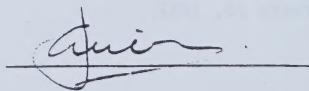
LIABILITIES

CURRENT			
Bank overdraft	\$	2,808	\$ -
Accounts payable		<u>113,054</u>	<u>18,957</u>
		115,862	18,957

EQUITY

RESTRICTED FUND (note 2)	1,850,872	1,925,500
UNRESTRICTED FUND (note 3)	<u>77,756</u>	<u>70,022</u>
	<u>1,928,628</u>	<u>1,995,522</u>
	<u>\$2,044,490</u>	<u>\$2,014,479</u>

Approved on behalf of the Trustees:

CANADIAN DENTAL FOUNDATION
STATEMENT OF EQUITY
FOR THE YEAR ENDED DECEMBER 31, 1992

	<u>1992</u>	<u>1991</u>
RESTRICTED FUND		
BALANCE - BEGINNING OF YEAR	\$1,925,500	\$1,925,416
Net revenue (expenditure) for the year	(<u>74,628</u>)	<u>84</u>
BALANCE - END OF YEAR	<u>\$1,850,872</u>	<u>\$1,925,500</u>
UNRESTRICTED FUND		
BALANCE - BEGINNING OF YEAR	\$ 70,022	\$ 64,452
Net revenue for the year	<u>7,734</u>	<u>5,570</u>
BALANCE - END OF YEAR	<u>\$ 77,756</u>	<u>\$ 70,022</u>

CANADIAN DENTAL FOUNDATION
STATEMENT OF REVENUE AND EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 1992

	<u>1992</u>			<u>1991</u>
	<u>Restricted</u>	<u>Unrestricted</u>	<u>Total</u>	<u>Total</u>
REVENUE				
Investment income (Schedule B)	\$173,606	\$7,234	\$180,840	\$192,074
Donation income	<u>-</u>	<u>500</u>	<u>500</u>	<u>-</u>
	173,606	7,734	181,340	192,074
EXPENSES				
Grant - library	214,000	-	214,000	141,324
Meetings				
- travel and accomodation	10,939	-	10,939	13,418
- per diems	1,134	-	1,134	1,078
Professional fees	13,119	-	13,119	15,994
Administration fees	<u>9,042</u>	<u>-</u>	<u>9,042</u>	<u>14,606</u>
	<u>248,234</u>	<u>-</u>	<u>248,234</u>	<u>186,420</u>
NET REVENUE (EXPENDITURE) FOR THE YEAR	(\$ <u>74,628</u>)	<u>\$7,734</u>	(\$ <u>66,894</u>)	<u>\$ 5,654</u>

CANADIAN DENTAL FOUNDATION
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 1992

1. SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

Revenue and expenses are recorded on the accrual basis, whereby they are reflected in the accounts in the period in which they have been earned and incurred respectively, whether or not such transactions have been finally settled by the receipt or payment of money.

2. RESTRICTED FUND

This fund was established from net proceeds of the Langstaff Estate Bequest. The donor has restricted the use of the fund's income and capital for the library and library-related activities.

3. UNRESTRICTED FUND

This fund was established for accumulating capital donations for which the income generated has not been restricted by the donor.

4. STATEMENT OF CHANGES IN FINANCIAL POSITION

This statement has not been prepared as management is of the opinion that it would not provide additional useful information.

Schedule A.

CANADIAN DENTAL FOUNDATION

SCHEDULE OF INVESTMENTS

AS AT DECEMBER 31, 1992

	<u>Due Date</u>	<u>Face Value</u>	<u>Cost</u>	<u>Market Value</u>
TREASURY BILLS				
Government of Canada	06/05/93	\$200,000	\$ 194,024	
Government of Canada	13/05/93	150,000	145,194	
Government of Canada	02/09/93	40,000	<u>38,210</u>	
			377,428	\$ 377,428
BONDS - GOVERNMENT				
Government of Canada	01/02/96	300,000	297,000	
Government of Canada	01/03/97	200,000	203,825	
Government of Canada	01/02/98	250,000	238,000	
Ontario Hydro	06/02/02	200,000	205,200	
Province of Ontario	16/04/97	100,000	<u>101,000</u>	
			1,045,025	1,039,342
MORTGAGES				
International Trust - The Mortgage Fund		200,000	200,000	199,936
COMMON SHARES - CANADIAN				
2,000 Bombardier Inc., Class B			29,664	
700 Northern Telecom Ltd.			<u>37,127</u>	
			66,791	62,000
COMMON SHARES - U.S.				
150 Alza Corp.			8,085	
800 Coca Cola Co.			29,256	
200 General Mills Inc.			17,926	
150 Home Depot Inc.			7,809	
600 Johnson & Johnson			31,542	
150 Medco			7,399	
600 Merck & Co. Inc.			35,709	
150 Microsoft Corp.			15,200	
1,000 Rubbermaid Inc.			34,798	
1,400 Sara Lee corp.			37,849	
600 Sigma Aldrich Corp.			29,959	
150 Stryker Corp.			6,792	
400 Wal-Mart Stores Inc.			27,658	
600 Walt Disney Co.			<u>22,418</u>	
			312,400	360,595
BALANCE - ROYAL BANK INVESTMENTS MANAGEMENT INC.				
			<u>11,966</u>	<u>11,966</u>
			<u>\$2,013,610</u>	<u>\$2,051,267</u>

Schedule B.

CANADIAN DENTAL FOUNDATION
 SCHEDULE OF INVESTMENT INCOME
 FOR THE YEAR ENDED DECEMBER 31, 1992

	<u>1992</u>	<u>1991</u>
Interest earned on short-term notes, treasury bills, bonds, savings and broker's account	\$131,721	\$192,107
Dividends earned	6,622	5,448
Gains (losses) on disposition		
- bonds	63,993	20,160
- shares	(5,745)	(10,069)
Management fee	(15,751)	(15,572)
	<u>\$180,840</u>	<u>\$192,074</u>

CANADIAN DENTAL HYGIENISTS' ASSOCIATION

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

1. CDHA Executive Council

Presidents: Fran Richardson Cotton (1993-94)
Maxine Borowko (1994-95)
Margery Forgay (1995-96)
Lorraine Boomhour (1992-93)

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

2. CDHA Board of Directors

- a) **Mandate:** The Board is responsible for association policy, law, finance, planning and evaluation.
- b) **Structure:** The Board consists of five councils, each with an area of responsibility, all of which operate independently but report to the remaining four councils which collectively comprise the Board.

CDHA Board of Directors

Member Services	Executive	Health Promotion	Practice & Regulation	Professional Development
--------------------	-----------	---------------------	--------------------------	-----------------------------

c) CDHA Mission 1963-1993

The mission of the Canadian Dental Hygienists' Association is to cultivate, promote and sustain the art and science of dental hygiene, to maintain the honour and interests of the dental hygiene profession and to contribute toward the improvement of the health of the public.

3. 1993 - 94 Meetings

1993	June 13-15	Dental Hygiene Standards Workshop	Ottawa
"	16-17	National Certification meeting	Ottawa
"	16	Association Planning and Evaluation Workshop	Ottawa
"	17-19	Council Meetings	Ottawa
"	20	Annual Board of Directors	Ottawa
"	21-22	Executive Council	Ottawa
September		Executive Council	Teleconference
Oct. 15-17		Council Planning Session	Niagara Falls
"	17-19	Annual Conference	Niagara Falls
"	20	ADHA/CDHA liaison meeting	Niagara Falls
"	17-24	National Dental Hygiene Week	Niagara Falls
November		Presidential visit	Atlantic Canada
1994	January	Executive Council	Winnipeg
		CDHA Councils	Teleconference
	March	Executive Council	Edmonton
	June	Council Sessions	Saskatoon
	June	Annual Board of Directors	Saskatoon
	June	Annual Conference	Saskatoon
	Sept/Oct	Executive Council	USA

4. EXECUTIVE COUNCIL

a) Professional Conference

APPENDIX A

1993 The 1993 CDHA Professional Conference is scheduled for October 15-17. CDHA is pleased to present a North American Conference, with research papers presented from Texas, California, Michigan, Virginia, Illinois, Idaho, Pennsylvania, Iowa, Tennessee, Ohio, and Canada. Dr. Roberta Bondar will open our conference with an address on Women in Science, and Dr. Jane Fulton, Health Policy Advisor, University of Ottawa will be the keynote speaker for the Saturday morning session. CDHA invites all dental professionals to attend and enjoy the proceedings as well as the autumn scenery Niagara Falls presents in October.

1994 See you in June in Saskatoon. Planning is underway for the 6th CDHA Professional Conference in Saskatoon, June 15-17. The topic for Saskatoon will focus on the ethics of practice and delivery of care. Dr. Michael Rachlis, Health Policy Advisor, and Mr. B. Cotter, Saskatchewan Deputy Minister of Justice have been confirmed as key speakers. Ethical issues in everyday practice as identified through Quality Assurance Workshops, will also be addressed through a panel discussion and use of the 1992 CDHA Code of Ethics.

1995 Halifax has been confirmed for our meeting in June 1995. The main topic will address meeting the needs of the disadvantaged.

b) Publications

Publications have been increased to provide monthly correspondence to all members. Both the journal Probe and the CDHA newsletter are now published bi-monthly. The CDHA journal does provide a classified section for dental practitioners interested in identifying employment opportunities across Canada. Ms Dianne Landry has been appointed Editorial Director of the journal with Marilyn Goulding remaining Scientific Editor.

c) CDHA/CDA

Two management meetings were held in 1993 in Ottawa in March and again in April in Toronto. CDHA supports this process as an important and valuable opportunity for management to discuss items of common interest.

d) CDHA/ADHA

CDHA/American Dental Hygienists' Association annual liaison meeting was held in March 1993 in Ottawa. A second is planned during October as both national associations will be present for the research conference.

e) CDHA Evaluation Workshop

Sheryl Feller, MBA, RDH, facilitated the Board of Directors 3 year association evaluation and planning session, June 16th. This included:

- evaluation of association 3 year plan based on council outcomes related to goals, objectives and structure of association
- planning for 1993-96 through revision of association and council goals and objectives where required based on review and update of Executive Council annual environmental scan.

5. PROFESSIONAL DEVELOPMENT COUNCIL

a) Research Fellowship Award

A second CDHA research award is now available and will be formally announced in October during the research conference. This award will be awarded for development and implementation of research programs in dental hygiene; clinical, public health or education. The first CDHA fellowship award, which is now sponsored by Procter & Gamble was established in 1987 and is available for a dental hygienist returning to full-time masters or doctoral research studies.

b) ACFD/CFDE Dental Hygiene Workshop

CDHA participated in an ACFD/CFDE workshop, March 4/5, 1993 to discuss revisions to the dental hygiene competency profiles, the impetus coming from the June 1992 CDA Council on Education meeting. The focus of the workshop was directed to educational standards in dental hygiene and dental assisting including national competency profiles, national certification and clinical practice standards. The major focus for dental hygiene resulted in self-definition as a building block for the revision and development of educational standards. CDHA was identified as the most appropriate group to organize and finance a working group which was held June 13-15 in Ottawa. The second purpose for this workshop included updating and revising current Clinical Practice Standards into a comprehensive standards model.

c) Task Force on Dental Hygiene Education

The Professional Development Council has struck a task force on the development of dental hygiene education standards for the year 2000 which began by hosting the June 13-15 Workshop. This will be followed by participation at the ACFD education workshop in Niagara Falls on October 15th, and a third workshop scheduled for spring 1994. The task force report of which B. Craig and E. McIntyre are co-chairs is expected to present to the CDHA Board of Directors late 1994.

6. PRACTICE AND REGULATION COUNCIL

- a) Recommendations regarding Fluoride and Infection Control Guidelines are being drafted for board presentation and approval.
- b) An invitation was extended to dental registrars asking for their interest in contributing to and the establishment of an ongoing partnership to monitor and update national statistics regarding dental hygienists authority data.

7. MEMBER SERVICES COUNCIL

- a) Statistical Review

Member Services council has completed a statistical review of CDHA members to identify member, regional and future needs as well as define 3-5 year incremental plan for addressing target and focus groups.

- b) Student Membership

Student binders are distributed annually to all programs outlining CDHA, the profession and the two CDHA student scholarships. This year CDHA was able, with corporate assistance to provide all graduates with a gift to welcome them to the profession.

8. HEALTH PROMOTION COUNCIL

- a) Smile for Life - National Dental Hygiene Week

APPENDIX B

National Dental Hygiene Week has been scheduled for October 17 - 23, 1993. This year focus will be on the school-age child aimed at the 6 - 10 year old age group. Materials will be distributed to members with the July/August journal. 200,000 kits will be distributed by dental hygienists in public health to schools across Canada during the month of October. Planning is presently underway for 1995 and 1996.

Respectfully submitted,

The Executive Council,
Canadian Dental Hygienists' Association

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Dental Hygienists' Association as information.

CDHA Conference

A North American Research Conference

October 15 - 17, 1993 — Niagara Falls, Ontario

Program Outline

Friday, October 15 Preconference Workshop

Moving The Profession Of Dental Hygiene Towards The Year 2000
Facilitator: Susanne Sunell
See page 95 for details & registration form.

Opening Reception Friday Evening

Guest Speaker: Dr. Roberta Bondar is best known as an astronaut who flew on the Discovery in January 1992. On the mission, she performed experiments in the Spacelab and on the middeck. Dr. Bondar is a neurologist, a clinical and basic science researcher of the nervous system and conducts research into blood flow in the brain during microgravity, lower body negative pressure and various pathological states. Dr. Bondar has received a plethora of special honours over the past two decades, including numerous Honourary Doctorates from universities throughout Canada. She also is the recipient of *Châtelaine* Magazine's 1993 Woman of the Year Award.

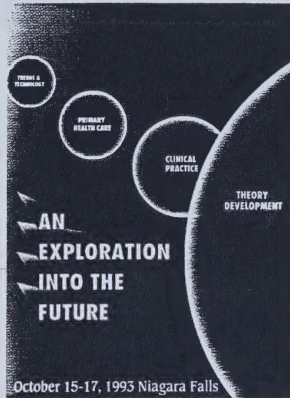
Saturday, October 16

Keynote Speaker: Dr. Jane Fulton will elaborate on the need for research in dental hygiene, and the relationship of research to professionalism. The necessity of integrating theory and practice in dental hygiene will also be discussed.

Presentations: That will appeal to both practitioners and researchers

- **Remaining Current in Practice:** This session will deal with information retrieval practices. What resources do people use to stay current?

- **Using Research in Dental Hygiene Practice:** How do we transfer knowledge from research to the dental hygiene practice? What are the barriers?



- **Submitting Manuscripts to Dental Hygiene Journals:** Joint presentation by CDHA and ADHA on how to prepare manuscripts for submission to their respective journals. A review of the ingredients of a scientific paper and evaluation mechanisms used by both associations in assessing manuscripts for publication. Learn how to transform your expertise into the written word.

- **Understanding the Scientific Literature:** Why must dental hygienists examine the scientific literature and what is the importance of the literature in developing the "art and science" of dental hygiene? This presentation will describe types of scientific literature, and the use of abstracts by dental hygienists.

- **Theory Development Workshop:** A working session designed to consider: theories related to the practice of dental hygiene, the categorization of data to formulate theory, the structure and development of models, how to set up research to test models, and how to validate theory.

- **Testing & Validating Theory Workshop:** Designed to build on Theory Development workshop by examining "Human Needs Theory" or other appropriate theories, and the relationship of theory to dental hygiene practice. How do you test and validate such theory? What is its clinical application?

- Free Papers
- Commercial Exhibits (all day)
- Table Clinics and Poster Sessions

Sunday, October 17

- **Mini-Sessions:** Explanation and examination of current research efforts which will affect the practice of dental hygiene now and in the future. Topics will include the use of lasers, saliva research, the use of computers for assessment and diagnosis, the purposes of microbiological testing, and research on health policy, demographics and economics.

- **Survey Research Workshop:** Survey research methods are frequently used by dental hygiene researchers to assess knowledge, attitudes, skills, beliefs, and practices. This workshop is designed to describe the purpose of survey research as well as offer participants a practical understanding of how to develop and conduct surveys. Means of analyzing survey results will also be discussed.

- **Qualitative Research:** Qualitative research design and methods are best suited to questions that are exploratory in nature or which seek to provide an "in-depth" understanding of detail and experience. This presentation is designed to inform dental hygiene researchers about the usage and strategies of qualitative research.

- **Common Flaws in Research:** A "learn from your mistakes" presentation on common flaws in research relating to methods, writing techniques, literature reviews, problem formulation, sample errors, external validity and statistical analysis.

- **Corporate Panel Discussion:** Representatives of the "corporate world", government / non-profit agencies and the dental hygiene community will discuss the influence of funding sources on current and future research, funding priorities, grantsmanship, and the role of the dental hygienist in oral health research.

Schedule of Events

DAY/DATE

FUNCTIONS

Friday, October 15, 1993

- All Day** **Moving The Profession Of Dental Hygiene Towards The Year 2000**
(Workshop — see page 95 for details)
Facilitator: Susanne Sunell
- Evening** **"Women in Science & Research"**
Guest Speaker: Dr Roberta Bondar
followed by Wine & Cheese Reception

Saturday, October 16, 1993

- 8:30 - 9:30** **"Health Care Trends"**
Keynote Speaker: Dr Jane Fulton
- 9:00 - 12:00** **Commercial Exhibits**
- 9:30 - 11:30** **Table Clinics & Poster Sessions**
Details to be printed in next issue of *Probe*
- 9:30 - 12:30**
- 1) **"Remaining Current in Dental Hygiene Practice"**
Sharon Gravois, RDH (USA)
 - 2) **"Using Research in Dental Hygiene Practice"**
Linda Kraemer, RDH, PhD (USA)
 - 3) **Manuscript Preparation**
Marilyn Goulding, RDH, BSc (Probe-CAN)
JoAnn Gurenlian, RDH, PhD
(Dental Hygiene-USA)
 - 4) **"Understanding the Scientific Literature"**
Nancy Keselyak, RDH, MA (CAN)
- or —
- 9:30 - 12:30** **Theory Development Workshop**
Jacqueline Fawcett, PhD (USA)
- 2:00 - 5:00** **Testing & Validating Theory Workshop**
Margaret Walsh, RDH, EdD (USA)
Michele Darby, RDH, MS (USA)
- 2:00 - 5:00** **Free Papers**
Details to be printed in next issue of *Probe*
- 2:00 - 5:00** **Commercial Exhibits**

DAY/DATE

FUNCTIONS

Sunday, October 17, 1993

- 8:00 - 9:00** **Chlorzoin Therapy**
A treatment researched and developed by Jim Sandham, DDS, PhD, of the University of Toronto
- 8:30 - 10:15** **"Qualitative Research"**
Karen Grant, PhD (CAN)
- 9:00 - 12:00** **Mini Sessions: Research That Will Affect Future Dental Hygiene Practice**
Moderator: Janice Pimlott, RDH, MSc
- 1) **Lasers** — Patricia Ling, DMD, MSc
 - 2) **Saliva Research** — Colin Dawes, BDS, PhD
 - 3) **Computers in Practice** — David Singer, DMD, PhD
 - 4) **Micro-Diagnosis** — Marilyn Goulding, RDH, BSc
 - 5) **Health Policy, Demographics, and Economics** — Joanne Clovis, RDH, MSc
- 9:00 - 12:00** **"Survey Research workshop"**
Megan Kromer, PhD (USA)
- 10:15 - 12:00** **"Common Flaws in Research"**
Denise Bowen, RDH, MS (USA)
- 1:00 - 3:00** **Corporate Panel Discussion**
Moderator: Kathleen Newell, RDH, PhD (USA)
- Corporate Dental Hygiene Representatives*
Teledyne Inc. (Marsha Stein, RDH (CAN))
Proctor & Gamble (Janet Cain-Hamlin, RDH, MS (USA))
- Representatives from Government/Non-Profit Agencies*
Canadian Fund for Dental Education
Health & Welfare Canada
National Institute of Dental Research
Dental Hygiene Researchers
Patricia Johnson, RDH, PhD (CAN)
Karen Gross, RDH, MS (USA)
- 3:00 - 5:00** **Plenary: Theory Development Workshops**
Moderators: Denise Bowen, RDH, MS (USA)
Laura MacDonald, RDH, MEd (CAN)
- Time tba** **Free Papers**
Details to be printed in next issue of *Probe*

Travel Arrangements

CDHA has appointed MKI Travel and Conference Management Inc. and Air Canada as the official Travel Agency and Airline for this event.

The Benefits:

- Special negotiated conference airfares and savings up to 65% off full fares
- A dedicated team of bilingual conference travel experts
- Hotel reservations can be coordinated through MKI
- \$200,000.00 complimentary airlift accident insurance
- Free ticket delivery to each delegate.

*Through consolidation of airticket purchases
CDHA and its members will benefit as a whole.*

Call MKI Travel and Conference
Management Inc.

1-800-267-9676

and ask for Platte or Gerri-Lynn

or non-residents of Canada
may call collect:

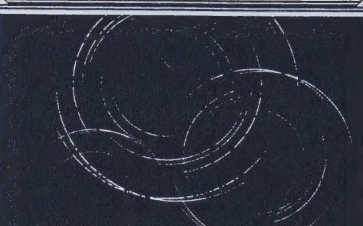
(613) 234-1395

Niagara Airbus shuttle service is available from both Toronto and
Buffalo airports. Estimated costs:

Buffalo airport to Niagara (return) - approx. \$75 Cnda pp

Toronto airport to Niagara (return) - approx. \$60 Cnda pp





What do you do with someone who has an overpowering vision of what the world might be? These visions lead us forward — sometimes into disaster (Lenin and Russia), sometimes into a new world (Franklin, Jefferson and America). At a moment of almost total defeat what was left of the French government listened to Joan of Arc because nobody else had any ideas. She gave them success beyond their wildest dreams. Then they discarded her. This is one of the great plays of our time and so pertinent in our world where we are alternatively crying out for visions and in the next moment running terrified from them.

- Christopher Newton
Artistic Director

All-Day Workshop: Moving the Profession of Dental Hygiene Towards the Year 2000

Dental hygiene educators and licensing body representatives wishing to explore the profession of dental hygiene as it moves in new directions will be interested in this workshop. Participants will have the opportunity to learn about and investigate current issues in dental hygiene education standards, dental hygiene accreditation standards, including the CORE process, National Certification, and continuing competence. The workshop format will promote a sharing of ideas and concerns in both large and small groups. Clinical practitioners interested in attending please contact Susanne Sunell at (604) 443-8505 or Fax (604) 443-8588.



Registration for Friday Workshop Only

Date: Friday, October 15, 1993

Time: 9:00 to 4:00

Place: Sheraton Fallsview Hotel, Niagara Falls, Ontario

Registration Fee: \$35.00 (includes lunch)

Information from Registrants:

Name: _____

Address: _____

Current Dental Hygiene Involvement:

Identify the area in which you spend the major part of your time:

☐ Community Health

☐ Licensing Organizations

☐ Clinical Practice

☐ Education

☐ Other _____

(if yes, name of program)

Participant Expectations: What do you hope to gain from the workshop? Do you have a particular question you would like to have addressed? _____

**Pre-registration is critical
to allow for scheduling
of facilities and the
organization of the
working groups.**

**DEADLINE FOR REGISTRATION:
SEPT. 15, 1993**

MAIL REGISTRATION TO:

Susanne Sunell, RDH
c/o The Canadian Dental
Hygienists' Association
1018 Merivale Rd., Suite 201
Ottawa, Ontario
K1Z 6A5

NDHC

National Dental Hygiene Campaign 1993

October 17-23



It is the second year of the "Behind every great smile..." campaign, and for 1993 CDHA and Procter and Gamble have joined together in a partnership to promote personal and professional dental care to school-age children in Canada.

The goal of National Dental Hygiene Campaign is to promote the awareness of Dental Hygiene as a distinct profession and to facilitate health promotion activities which will contribute towards improving the public's overall health. This year's special fact sheets on fissure sealants and mouth care for children will be printed in English and French. There will also be stickers for children, and a poster which comes in two sizes. Samples of these items, plus instructions for a fluoride egg experiment will be included with the July/August edition of *Probe*. Plus a special CDHA travel mug will be available.

To become involved — first contact your provincial co-ordinator (names and addresses given on the following page), to find out what is being planned in your area. Then,

get together with a group of colleagues to devise some more activities. If perhaps you do not know any other hygienists locally, ask your provincial co-ordinator for names. But don't give up if you are alone, individual endeavours are encouraged! Provincial co-ordinators will also help you with obtaining media coverage. And do inform them of your activities — many interesting events go unrecorded. So ask for an Evaluation Form and remember to return it, duly completed. These forms are very important in planning future campaigns.

Some suggestions for this year:

- Visit elementary schools, community centres, lunch rooms, church groups, Brownie or Cub groups.
- Offer to sponsor a field trip to your dental office
- Set up displays in restaurants geared for children
- Place the logo on milk cartons
- Target children's television programs, day programs for stay-home parents

- Put up posters in schools, malls and waiting rooms

Topics to discuss:

- What is a dental hygienist, and what does she/he do?
- Brushing and flossing techniques — with demonstrations
- Nutrition counselling
- What are good, and bad, snacks
- When to eat Halloween treats
- Suggest giving toothbrushes and/or floss for Halloween.

As a reminder — the Older Adult poster and series of fact sheets are still available. And so are the "Behind every great smile" sweatshirts! See the order form on page 107.

Get active in promoting your profession — each activity broadens the awareness of personal and professional dental care to the public.

Dawn Mueller

National Dental Hygiene Campaign Co-ordinator

CANADIAN FUND FOR DENTAL EDUCATION

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

Board of Trustees:

Dr. Gordon Thompson, Edmonton, Chairman
Mr. Lee Maddison, Burlington, Vice-Chairman, Dental Industry
Dr. Gregory Baird, Halifax
Dr. François Bourassa, Regina
Dr. Robert Dupont, Montreal
Mr. Jardine Neilson, Ottawa, Ex-officio
Dr. Donald O'Connor, Ottawa
Dr. David Singer, Winnipeg, Dental Education
Dr. Arnold Steinbart, Prince George
Mr. Arthur Zwingenberger, Toronto

Fund Administrator:

Mrs. Julie Hentschel

1. Meetings

The Annual General Meeting of the CFDE Board of Trustees was held May 16-17, 1993 in Ottawa. The Trustees are pleased to report on the current activities of the CFDE and the deliberations of the meeting.

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

2. Review of 1992

The Canadian Fund for Dental Education celebrated 30 years of service to dentistry in 1992. The CFDE Annual Report and Honour Roll, which was published as a supplement to the April issue of the *CDA Journal*, highlighted the support the Fund has provided for the current year and over its 30-year history.

Total income in 1992 was \$411,294 -- an increase of \$15,029 over 1991. Donations to endowment and developing funds, which are restricted in use according to the specific guidelines of each fund, were \$36,696. Net receipts for the unrestricted general fund totalled \$374,598. Although donations from dentists to general funds declined for the year, contributions to endowment and developing funds increased by 42%.

Two new endowment funds were established in 1992. Retired Ontario dentist Dr. Allan Chantler donated \$10,000 in support of general dental education and research programs. The Dr. Ken W. Lawless developing fund reached endowment fund status during the year and has total assets of \$13,200. A developing fund must attain \$10,000 within five years to become an endowment fund.

The CFDE benefitted from the higher interest rates of previous years on several long-term capital investments to earn an average of 9.75% interest over the year. Operating expenses increased marginally from 27.6% in 1991 to 29.7% in 1992.

CFDE INCOME

	<u>1992</u>	<u>1991</u>
Dental Profession		
General Fund	\$ 92,089	\$ 109,890
Endowment Funds:		
Mancini Fund	4,309	4,597
McDonald Fund	200	175
Barrett Fund	1,026	613
Thomas Curry Fund	4,705	5,010
Charles Hunt Fund	8,202	4,790
Allan Chantler Fund	10,100	-
Developing Funds:		
Don Winget Fund	2,154	3,135
Ken Lawless Fund	5,700	7,500
Dental Organizations	36,525	34,375
Allied Dental Health Organizations	3,713	2,803
Allied Dental Health Professionals	3,615	2,320
Business and Industry	116,484	117,831
Investment Income	81,768	83,385
Sundry	8,578	10,130
Gifts in Kind	22,133	-
In Memoriam	8,668	7,675
Tributes	775	790
Other Contributors	250	1,246
Foundations (MacLachlan)	300	-
TOTAL RECEIPTS	<u>\$ 411,294</u>	<u>\$ 396,265</u>

3. Plans for 1993

To date, three new developing funds have been established in 1993. Donations received in memoriam to Dr. Barbara Wilson of Milton, Ontario, past president of the Burlington Academy of Dentistry and a current member of the Executive Council of the Ontario Dental Association; Dr. Donald Williams of Moncton, New Brunswick, a past president of the Canadian Dental Association; and Dr. William Madronich of Hamilton, Ontario, have been directed to Funds established in their names.

At its May meeting the Board approved \$248,892 in assistance to dental education, research and awareness programs. Programs receiving support in 1993 include:

- (a) a total of \$15,000 representing unrestricted grants of \$1,500 awarded annually to each of the 10 dental faculties
- (b) a total of \$20,000 for two annual undergraduate grants of \$1,000 to each of the ten dental schools to support scholarships, awards or prizes to two undergraduate dental students
- (c) a total of \$9,000 granted to assist dental and dental hygiene students in financial difficulty from the Dr. Nicholas A. Mancini, the Dr. G.W. Barrett, and the Dr. Allan Chantler Endowment Funds
- (d) an allocation of \$11,000 to the 1993 CDA Students' Conference
- (e) a grant of \$6,000 to the 1993 Canadian Dental Hygienists' Association North American Research Conference
- (f) \$16,700 to support the "Development of Multimedia Courseware: the Masticatory Muscles" project at the University of Montreal
- (g) the 1993 Quality Assurance Workshop at the University of Toronto received \$5,000
- (h) the CFDE Murray McDonald Memorial Lecture at the April 1993 ODA/CDA Dental Meeting in Toronto sponsored a presentation by circumnavigators Fiona McCall and Paul Howard
- (i) a total of \$31,455 allocated for teacher/researcher training fellowships to seven dentists, three hygiene teachers and one dental assisting teacher.
- (j) \$10,000 was awarded through the support of Wrigley Canada to the Wrigley Research Awards Programme in 1993. Research programmes at the Universities of British Columbia, Manitoba and Dalhousie were granted awards this year.
- (k) with support from CREST/Procter & Gamble, the 1993 CDA Teaching Conference on Hospital Dentistry received \$15,000. The conference will provide a forum for comprehensive discussion on hospital dentistry including educational and research responsibilities, service commitments, the accreditation process, administrative and financial support.

- (l) the CFDE/ACFD Summer Teaching/ Management Institute was granted \$44,000. The Institute is an intensive eight-day learning experience designed to provide participants with practical teaching methods that can be directly applied in laboratories, seminars, clinics and lectures.
- (m) the income of \$14,625 from the Dr. Lorne E. MacLachlan Endowment Fund is divided equally again this year among the dental faculties at Toronto, Western Ontario, McGill and Dalhousie to benefit the prosthodontics departments, according to the terms of the endowment
- (n) the Royal College of Dentists of Canada (RCDC) Examiners' Workshop was allocated \$5,000
- (o) the Branemark Cranio-Maxillofacial Rehabilitation Program, established through the support of Nobelpharma Canada, will supply components to assist patients in financial difficulty who require osseointegration treatment. In addition, Nobelpharma has committed \$2,000 annually over the next five years to the Branemark Cranio-Maxillofacial Rehabilitation Developing Fund, to promote programs in education relating to reconstructive surgery based on the principles of osseointegration.

Appreciation

As I complete my two-year term as Chairman of the Canadian Fund for Dental Education, I would like to express my sincere gratitude to all the supporters who, over the 30-year history of the Fund, have so generously given of their time and money. I would also like to thank the Board of Trustees and staff for their hard work and commitment. I believe that everyone connected with the Fund can take pride in the contributions the CFDE has made to dental education, research and awareness since 1962.

Respectfully submitted,

Dr. Gordon W. Thompson, Chairman
Canadian Fund for Dental Education

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Fund for Dental Education as information.

THE ROYAL COLLEGE OF DENTISTS OF CANADA

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

1. RCDC Annual Meeting, 1993

The 1993 Annual Council Meeting, Convocation and Annual Dinner, together with Committee meetings and the second Workshop for Examiners, will be held in Toronto on August 27, 28 and 29 at the Toronto Hilton Hotel.

Dr. James T. Hayward, eminent American Oral and Maxillofacial Surgeon, will be accepting Honorary Fellowship at the Convocation on August 28th.

A special celebration to mark the 27 years of devoted service to the College of Dr. John Speck will be held at the Annual Dinner to follow Convocation, and it is our hope that his friends and colleagues will attend to help us honour his contribution to dentistry. Council will be considering a recommendation for Dr. Speck's successor at its August meeting.

2. Workshop for Examiners

Following the success of a Workshop for College examiners held in 1990, Examiner-in-Chief Keith Titley has been authorized to organize a second one to be held on August 28, 1993, in Toronto. The focus of the Workshop will be on the history and rationale for the College's present examination process, and the need for adjustments to meet changing political, academic and professional conditions. A copy of the proposed program is appended to this report.

APPENDIX I

Each Chief Examiner was requested to submit names of examiners to be invited and 44 invitations have been sent at the time of writing this report. Other invited guests will be members of the College's Council, Canadian graduate departments heads and representatives of the provincial licensing bodies, the CDA and the NDEB.

The College gratefully acknowledges support from the CFDE for this Workshop.

3. Examinations

The following represents the number of candidates for the Membership and Membership examinations held May/June, 1993:

	<u>Fellowship</u>	<u>Membership</u>
Endodontics	-	2
Oral & Max. Surgery	12	-(*)
Oral Pathology	3	-(*)
Orthodontics	2	4
Pediatric Dentistry	-	1
Periodontics	1	4
	<u>18</u>	<u>11</u>

(*) - Membership Examinations are no longer offered in these specialties.

Written examinations on May 7th were held in Vancouver, Edmonton, London, Toronto, Montréal, Québec City, Halifax, Chicago, Richmond (Virginia), Newark (Delaware), Hong Kong and Leeds and London, England. The Membership orals and Fellowships on June 12th and 19th were held in Winnipeg, Toronto and Montréal.

Successful examinees will be admitted to the College at the Convocation in Toronto on Saturday, August 28, together with 3 new Fellows and 8 new Members from previous examinations.

4. Council and Chief Examiner Vacancies

Councillors whose terms will be expiring this year are:

Dr. Neil Munro, Toronto, Orthodontics (first term)
 Dr. Colin Price, Vancouver, Oral Radiology (second term)
 Dr. Edward Chesko, Vancouver, Periodontics (second term)

Dr. Munro is willing to stand for a second term, and nominations have been called for in all three specialties, as required by the College's election procedure. Any elections will be held in June, and successful nominees will take office after the August Council meeting.

Dr. Fred Muroff, Chief Examiner in Periodontics, was recently re-appointed for a second three-year term to December 31, 1995. Other Chief Examiners whose terms will expire on December 31st this year are:

Dr. Robert Romcke, Charlottetown, Dental Public Health
Dr. William Christie, Winnipeg, Endodontics
Dr. Paula Sikorski, Toronto, Oral Radiology
Dr. Robert Faith, Montreal, Orthodontics
Dr. David Kennedy, Vancouver, Pediatric Dentistry

Only Dr. Kennedy will be completing his second term, so that the College's Council will be considering a recommendation for his successor at its August meeting.

Respectfully submitted,

Guy Maranda, President
The Royal College of Dentists of Canada

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Royal College of Dentists of Canada as information.

ROYAL COLLEGE OF DENTISTS OF CANADA

EXAMINER'S WORKSHOP

SATURDAY, AUGUST 28, 1993 - TORONTO, ONTARIO

- 8:00 - Refreshments, Continental Breakfast
- 9:00 - INTRODUCTION, Dr. Guy Maranda, President
- 9:15 - EXAMINATIONS ORGANIZATION, THE COLLEGE PERSPECTIVE -
Dr. Keith C. Titley, Examiner-in-Chief
Ms. Kay Montgomery, Executive Director
- 10:15 - Coffee Break
- 10:30 - MEMBERSHIP VERSUS FELLOWSHIP
TBA - The Historical Perspective
Dr. David S. Precious - Rationale for Fellowship only
Dr. David B. Kennedy - Rationale for retaining membership
- 11:30 - GENERAL DISCUSSION AND QUESTION PERIOD
- 12 Noon - LUNCH
- 13:00 - RELEVANCE OF THE RCDC EXAMINATIONS TO SPECIALTY PRACTICE -
Dr. Keith C. Titley
Dr. Robert W. Faith
Dr. David B. Kennedy
Ms. Kay Montgomery
- (i) How are candidates attracted?
- (ii) Mechanism for regular review of requirements.
- 14:00 - BREAK-OUT SESSIONS - By specialty
- 15:00 - COFFEE BREAK
- 15:15 - DISCUSSION AND WRAP-UP
- 05-04-93

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

The Canadian Academy of Oral Radiology held their 21st Annual Meeting and Scientific Sessions on May 1, 1993, in Toronto, Ontario, under the chairmanship of Dr. Colin Price. Ten abstracts were presented at the scientific sessions in the morning and are listed below:

Accessory maxilla associated with lateral facial cleft.

K. DeGurse, D. Stoneman, H. Chung, M. Pharoah.

A review of the radiographic characteristics of chronic osteomyelitis of the mandible.

E. Orpe, L. Lee, M. Pharoah.

Comparison of bacterial contamination of plastic and paper wrapped film packets in dental radiography.

G.V. Packota, K. Komiyama.

The radiographic features of odontogenic keratocysts of the mandible.

R.N. Bohay, M. Pharoah.

Direct determination of risk from diagnostic radiographs: future possibilities.

B. Pass, J.E. Aldrich, D. Godfrey-Smith.

The mandibular lingual foramen. A consistent finding in the anterior mandible.

D. McDonnell, M.E. Todd.

Three-dimensional reconstruction of MR images of the TMJ by I-DEAS.

C. Price.

Radiolucency of the left maxilla in a 35 year old Oriental female.

C.G. Petrikowski

The radiographic features of giant cell granulomas of the jaws.

J. Kanehisa, L. Lee, M. Pharoah.

Forensic dental radiographic identification.

R.E. Wood.

The afternoon session consisted of a clinical radiology conference, where 12 cases submitted by members were presented and discussed. The annual general meeting followed. Highlights of the annual general meeting are summarized below.

The Academy has undergone an official name change*, incorporating "maxillofacial" into its name, and will now be known as the Canadian Academy of Oral and Maxillofacial Radiology.

The Academy has voted to support the new Federation of Dental Specialists.

Dr. Paula Sikorski, as chief examiner for Oral Radiology of the Royal College of Dentists of Canada, informed the Academy that it has been recommended that the Membership examination in Oral Radiology no longer be offered. Candidates in Oral Radiology will take the Fellowship examination.

The Academy has recommended the appointment of Dr. R.E. Wood as the Radiology specialty editor of the CDA Journal.

A new slate of officers has been approved:

President	Dr. P. Sikorski
Past President	Dr. C. Price
President-Elect	Dr. M.J. Pharoah
Secretary-Treasurer	Dr. C.G. Petrikowski
Education Committee Chairman	Dr. C.G. Baker
Membership Committee Chairman	Dr. G.V. Pakota
Constitution and bylaws Committee Chairman	Dr. A. Ruprecht
Historical Documentation Committee Chairman	Dr. H.G. Poyton
Public and Professional Committee Chairman	Dr. D.A. Miles

The 22nd meeting of the Academy will be held in Toronto, Ontario on August 20, 1994. Dr. Paula Sikorski will chair this meeting.

NOTE: * The name change has not been reviewed by the Academy's Bylaws Committee, and an official request will be forwarded to CDA following a review.

Respectfully submitted,

C.G. Petrikowski, DDS,MSc,Dip Oral Rad, MRCD(C)
Secretary-Treasurer
Canadian Academy of Oral and Maxillofacial Radiology

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Academy of Oral Radiology as information.

CANADIAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

The Canadian Association of Oral and Maxillofacial Surgeons co-hosted its 37th Annual Scientific Meeting with the Canadian Association of Prosthodontists. This meeting was held in Banff, Alberta from March 20, 1992 to March 25, 1992. C.A.O.M.S. President Aron Gonshor and the C.A.P. President Lawrence C.R. St. Pierre presided.

1. Executive Director:

For some time it has been apparent that the C.A.O.M.S. needed a central manager. President Gonshor presented the concept of an Executive Director. A motion was unanimously passed to continue negotiations with Dr. Al Swanson with the intent of having him appointed as Executive Director of the C.A.O.M.S. We are pleased to inform the Board that Dr. Al Swanson has been appointed as Executive Director of the C.A.O.M.S. Dr. Swanson brings, to this position, a wealth of experience and an enthusiasm that will greatly assist in producing and maintaining continuity in our organization with each Executive change and serve to improve our communications with the public, our members, other organizations and the C.D.A. His initial term will be for two years. The new telephone/FAX number for the C.A.O.M.S. is 604-261-1350.

2. Informed Consent:

For the past two years the C.A.O.M.S. has been working on a "made in Canada" informed consent for oral surgeons. Dr. Jack Zosky submitted the finished document for Executive approval and the informed consent forms have now been distributed to oral surgeons across Canada. At present time a French language version has been completed and is ready for distribution. An Ad Hoc Committee will be set up to periodically review the consent forms and make changes as required.

3. Constitution:

Two new membership categories are being proposed for the C.A.O.M.S. The first being a "Resident in Training" member. This category will allow oral surgery residents to participate in our organization. They will not be able to hold office or vote. The second category is "Sustaining Member." This category is being proposed to allow membership for those individuals who have retired completely from practice and who do not meet the criteria to become life members. These members will not be able to hold office or vote but shall enjoy all other benefits offered by our Association.

4. Public Relations:

The C.A.O.M.S. has set up a marketing and promotions committee. It is the mandate of this committee to promote the specialty of oral and maxillofacial surgery and the C.A.O.M.S. It is hoped that this committee will serve to inform not only dental practitioners but also the general public about who we are and what services we provide. It is also hoped that this committee will be able to assist in continuing education by providing speakers to speak to various local and provincial dental bodies on topics of interest. Dr. Sam Kukey is presently working on an innovative video project. The first video presentation being organized is on orthognathic surgery and the intent of these videos is to be able to present treatment options to the patients in an informative, organized fashion. The C.A.O.M.S. voted, unanimously, to continue to support this endeavour.

5. Endowment Foundation:

Dr. Ron Warren gave the report of the Foundation for Continuing Education and Research (C.A.O.M.S.), Fondation pour L'avancement de L'education et la Recherche, at the Banff Meeting. The Foundation has been very successful with its first publication, "Risks and Benefits of Removal of Impacted Third Molars - A Critical Review of the Literature." This review has circulated to the C.A.O.M.S. membership and published in the I.A.O.M.S. journal. The second project underway with the Foundation is a project on the risks and benefits of Orthognathic Surgery. A third project in the infancy stage is Risks and Benefits of Implants.

6. Future Meetings:

The C.A.O.M.S. is holding their 1993 annual scientific meeting, August 11 to 15th in Charlottetown, P.E.I. The 1994 scientific meeting will be held in Quebec City in September. A combined meeting is planned with the American Association of Oral and Maxillofacial Surgeons for 1995 in Toronto.

7. Current Executive:

The 1992-1993 Executive of the C.A.O.M.S. is as follows:

President:	Dr. Tom Stevenson
President Elect:	Dr. Phil Cyr
Past President:	Dr. Aron Gonshor
Treasurer:	Dr. Vic Moncarz
Secretary:	Dr. Sam Kucey
Executive Director:	Dr. Al Swanson

The current Executive of the Foundation for Continuing Education and Research, Fondation pour L'avancement de L'education et la Recherche is as follows:

Chairman:	Dr. David Precious
Vice-Chairman:	Dr. Simon Weinberg
Secretary/Treasurer:	Dr. Ron Warren
Trustee:	Dr. Paul Mercier
Trustee:	Dr. Keith Lindsay
President, C.A.O.M.S.	Dr. Tom Stevenson

8. Membership Report:

The membership of the C.A.O.M.S. continues to grow and the following is our membership status as of December 1992:

Active Members	176
Life Members	14
Honourary Members	5
Affiliate Members	6
Sustaining Members	1

9. Dental Specialties Committee:

The C.A.O.M.S. recognizes the importance of input from the Specialty Sections to the Board of the C.D.A. With the disbanding of the Dental Specialties Committee we appreciate the invitation from the C.D.A. for participation of the Specialty Section Presidents in this Committee and feel that this structure will promote better communication.

10. Anesthesia Committee:

For some time, the C.A.O.M.S. has recognized a need to establish an Anesthesia Committee to deal with problems and questions pertaining to general anesthesia. With recent problems in Canada, the need for such a committee has become very apparent. The C.A.O.M.S. is in the process of establishing such a committee. It is planned that the Anesthesia Committee will act as a central contact area for information, statistics, etc. and in the event of a problem, it will provide support and information to practitioners and governments alike.

11. Reports to the C.D.A. Board:

The C.A.O.M.S. is aware of the lapse in reports being submitted to the Board and apologizes for this oversight. We wish to inform the C.D.A. Board that steps have been taken to rectify this and that bi-annual reports can now be expected.

Respectfully submitted,

T.R. Stevenson
President, C.A.O.M.S.

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Association of Oral and Maxillofacial Surgeons as information.

CANADIAN SOCIETY OF PUBLIC HEALTH DENTISTS

REPORT TO THE 1993 ANNUAL MEETING - CDA BOARD OF GOVERNORS

ITEMS FOR INFORMATION - NOT REQUIRING BOARD ACTION

The Canadian Society of Public Health Dentists held a one half day Annual Business Meeting and one day Scientific Session at L'Hotel in Toronto, Ontario on April 28 and 29, 1993 in conjunction with the joint Canadian/Ontario Dental Association Convention.

At the Scientific Session, which was jointly sponsored by the CSPHD and OSPHD, Dr. David Johnston of the Department of Community Dentistry, University of Western Ontario spoke on Dental Fluorosis: Risks and Recommendations. Ms. Patricia Else, Senior Health Promotion Consultant, Ontario Ministry of Health presented on the Practical Aspects of Health Promotion. Dr. Malcolm Williamson, Director, Dental Health Services, British Columbia Ministry of Health outlined New Dental program initiatives in British Columbia. Dr. Jack Lee, City of Toronto Health Unit spoke on Seniors Dental Care: The City of Toronto Experience and Dr. Don McFarlane, Senior Dental Consultant, Ontario Ministry of Health demonstrated Ontario's new dental health indices data collection program.

At the business meeting, a number of topics were discussed.

Two motions were passed by a large majority of the members present, which open up CSPHD membership to non-dentists. The motions are contingent upon the fact that our status as a specialty group with the C.D.A. and the Royal College shall not be affected. Thus, non-dentist associate members cannot hold office and the name remains as the Canadian Society of Public Health Dentists. The motions basically put to rest an issue which has been discussed by the C.S.P.H.D. for many years.

The Canadian Society of Public Health Dentists is concerned with recent changes to publicly funded dental programs in Saskatchewan and Manitoba.

The C.S.P.H.D. Membership is extremely concerned that funding for the National Dental Epidemiology Project has been turned down by Health and Welfare Canada and that there appears to be no strong voice for dentistry currently at a national level.

As it appears that the document Oral Health in Canada: Facing the Future will now be released by the Federal Government under the Federal Freedom of Information Act, the C.S.P.H.D. will ask the C.D.A. to make a copy of the document available to all provincial dental associations.

Respectfully submitted,

Peter Cooney
President, Canadian Society of Public
Health Dentists

FILING OF REPORT

The Board of Governors receives with appreciation the report of the Canadian Society of Public Health Dentists as information.

GLOSSARY OF ACRONYMS
(utilized in CDA reports to the Board)

3P Committee	CDA Third Party Dental Plans Committee
ACFD	Association of Canadian Faculties of Dentistry
CCHFA	Canadian Council on Health Facilities Accreditation
CDA	Canadian Dental Association
CDAA	Canadian Dental Assistants' Association
CDF	Canadian Dental Foundation
CDHA	Canadian Dental Hygienists' Association
CDIP	Canadian Dental Insurance Plans
CDRF	Canadian Dental Research Foundation
CDSBC	College of Dental Surgeons of British Columbia
CDSC	CDA/CFDE Canadian Dental Students' Conference
CDSPI	Canadian Dental Service Plans Inc.
CFDE	Canadian Fund for Dental Education
CFDS	Canadian Forces Dental Services
CPR	Committee on Consumer Products Recognition
CSA	Committee on Student Affairs
CSAC	College Standards and Accreditation Council
DCF	Dentistry Canada Fund
DIAC	Dental Industries Association of Canada
DMD	Committee on Dental Materials and Devices
DPAC	Dental Practice Advisory Committee

FDI	Fédération Dentaire Internationale
HIV	Human Immunodeficiency Virus
ICD	International College of Dentists
ISO	International Standards Association
NDC	National Data Corporation
NDEB	National Dental Examining Board of Canada
ODHA	Ontario Dental Hygienists Association
ODN & AA	Ontario Dental Nurses and Assistants Association
ODQ	Ordre des dentistes du Québec
PIP	Purchaser Information Program
QDSA	Association des Chirurgiens dentistes du Canada
RCDC	Royal College of Dentists of Canada
RCDS	Royal College of Dental Surgeons of Ontario
SHNS	Shared Health Network Services
USCLS	Uniform System of Codes and List of Services

